04/20/2011 08:31

Image# 11931211789

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FURINI 3X	For C	Other Than An A	Authorized Com	nmittee	Off	iice Use Only
NAME OF COMMITTEE (in full)		FEC MAILING LAB YPE OR PRINT	EL Example:If over the lin	typing, type es		
American College of	Radiology Asso		on Committee			
	1 1 1 1	1 1 1 1 1	<u> </u>		1 1 1 1 1	
ADDRESS (number and s	street) 189	91 Preston White Dr	ive	1 1 1 1 1		
Check if differe than previously reported. (ACC	ı Be	eston			VA L	20191
2. FEC IDENTIFICAT	ON NUMBER	—	CITY 🛕		STATE	ZIPCODE 🛕
C00343459		3	. IS THIS X	NEW (N) OR	AMEN (A)	DED
July 15 Quarterly October 1 Quarterly January 3	Report(Q1) Report(Q2) 5 Report(Q3) 1 Report(YE) d-Year on-election) (MY)	(c) 12-Day PRE-Election Report for the (d) 30-Day Post -Electic Report for the	ection on Genera	May 20 (M5) Jun 20 (M6) Jul 20 (M7) y (12P) ntion (12C) al (30G)	Aug 20 (Sep 20 (Oct 20 (General (12G) Special (12G) Runoff (30R)	M9) Year Only) Dec 20 (M12) (Non-Election Year Only) M10) Jan 31 (YE) Runoff (12R)
5. Covering Period	03	01 2011	thro	ough 03	31 2	0 1 1
I certify that I have exami Type or Print Name of Tr		and to the best of my R William Herrington	_	ef it is true, correct	and complete.	
Signature of Treasurer	Electronically	Filed by DR Willia	ım Herrington		Date 04	20 2011
NOTE : Submission of fa	alse, erroneous,	or incomplete inform	ation may subject the	e person signing th	is Report to the pen	alties of 2 U.S.C 437g.
Office Use						FEC FORM 3X

FE6AN026

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name American College of Radiology Association Political Action Committee D D " D 0 1 03 2011 0.3 3 1 2011 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2011[°] 678928.36 January 1 (b) Cash on Hand at 775929.37 Begining of Reporting Period 105526.64 297170.96 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 881456.01 976099.32 6(a) and 6(c) for Column B) 181689.51 276332.82 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 699766.50 699766.50 (subtract Line 7 from Line 6(d)) Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

American College of Radiology Association Political Action Committee

М М 0 1 м м 3 1 2 0 1 1 2011 Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 96978.66 257912.02 (i) Itemized (use Schedule A) 8538.28 39234.78 (ii) Unitemized (iii) TOTAL (add 105516.94 297146.80 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 105516.94 297146.80 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 9.70 24.16 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 105526.64 297170.96 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 105526.64 297170.96 (subtract Line 18(c) from Line 19)

FE6AN026

DETAILED SUMMARY PAGE

of Disbursements FEC. Form 3X (Rev. 02/2003) Page 4

FEC Form 3X (Rev. 02/2003)	COLUMN A	Page 4 COLUMN B		
II. DISBURSEMENTS	II. DISBURSEMENTS Total This Period			
1. Operating Expenditures: (a) Shared Federal/Non-Federal				
Activity (from Schedule H4) (i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating Expenditures	0.00	0.00		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	0.00	0.00		
2. Transfers to Affiliated/Other Party Committees	0.00	0.00		
23. Contributions to Federal Candidates/Committees and Other Political Committees	179500.00	270500.00		
4. Independent Expenditure (use Schedule E)	0.00	0.00		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00		
6. Loan Repayments Made	0.00	0.00		
27. Loans Made	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	270.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees (such as PACs)	0.00	0.00		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	270.00		
9. Other Disbursements	2189.51	5562.82		
60. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity				
(from Schedule H6) (i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	181689.51	276332.82		
32. Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)	181689.51	276332.82		
from Line 31)	101003.31	210002.02		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	105516.94	297146.80
34.	Total Contribution Refunds (from Line 28(d))	0.00	270.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	105516.94	296876.80
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 100 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	d Statements may not be sold or used by any pers the name and address of any political committee to ociation Political Action Committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Julie Timins Mailing Address 20 Footes Ln		Date of Receipt
City Morristown	State Zip Code NJ 07960-6356	0 3 0 3 2 0 1 1 Transaction ID: 39068115 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. James Parker Mailing Address Lumberton Radiolog	gical Asso	Date of Receipt 0 3
209 W 27th St	State Zip Code	Transaction ID: 39068117
Lumberton	NC 28358-3016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer LRA	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. David Pennes		Date of Receipt
Mailing Address 2059 E Wyndham H	Hill Dr NE Apt 303	0 3 0 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 39068118
Grand Rapids	MI 49505-6358	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Advanced Radiology Servic- es Receipt For:	Occupation Diagnostic Radiologist	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optiona	<u>.</u>	2500.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 100 (check only one) X 11a
A OI	ny information copied from such Reports and for commercial purposes, other than using th	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Associately	ciation Politic	al Action Committee	
	Full Name (Last, First, Middle Initial) Dr. Kenneth Berkenstock			Date of Receipt
	Mailing Address Lancaster Radiology PO Box 3555	Associates		03 / 03 / 2011
	City	State	Zip Code	Transaction ID: 39068129
	Lancaster	PA	17604-3555	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		84.00
	Name of Employer Lancaster Radiology Assoc- iates	Occupation Radiation	n n Oncologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		252.00	
	Full Name (Last, First, Middle Initial) Dr. Jeffrey Kramer	1		Date of Receipt
	Mailing Address 2147 Meadow Ridge	Dr		03 / 03 / 2011
	City	State	Zip Code	Transaction ID: 39068137
	Lancaster	PA	17601-5762	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Lancaster Radiology Associates	Occupation Diagnost	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	300.00	
_	Full Name (Last, First, Middle Initial) Dr. Paul Leslie			Date of Receipt
	Mailing Address 260 Eshelman Rd			03 / 03 / 2011
	City	State	Zip Code	Transaction ID: 39068138
	Lancaster	PA	17601-5645	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Lancaster Radiology Assoc- iates	Occupation Diagnost	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		300.00	
\vdash				

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 100 (check only one) X
or for	nformation copied from such Reports and S r commercial purposes, other than using the AME OF COMMITTEE (In Full) merican College of Radiology Assoc	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. <u>D</u>	ull Name (Last, First, Middle Initial) r. Simon Westacott ailing Address 1965 Glendower Dr			Date of Receipt 0 3 0 3 2 0 1 1
	ity	State	Zip Code	Transaction ID: 39068142
FI	ancaster EC ID number of contributing deral political committee.	PA C	17601-4945	Amount of Each Receipt this Period
N La <u>ia</u>	ame of Employer ancaster Radiology Assoc- tes eceipt For: Primary General Other (specify)	,	on tic Radiologist e Year-to-Date ▼ 300.00	
<u>D</u>	ull Name (Last, First, Middle Initial) r. Patrick Weybright ailing Address 1234 Mastersonville R	Rd		Date of Receipt 0 3 0 3 2 0 1 1
C	ity	State	Zip Code	Transaction ID: 39068143
<u>N</u>	lanheim	PA	17545-9461	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		100.00
Li	ame of Employer ancaster Radiology Assoc- tes	Occupation Diagnost	n tic Radiologist	
R	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 300.00	
	ull Name (Last, First, Middle Initial) r. Philip Rogoff			Date of Receipt
М	ailing Address 58 Rogers Rd			03 04 2011
	ity	State	Zip Code	Transaction ID: 39073162
<u>C</u>	Carlisle	MA	01741-1865	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		500.00
_	ame of Employer chatzki Associates, Inc.	Occupation Diagnost	n tic Radiologist	
R	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
CITE	BTOTAL of Receipts This Page (optional)	1		700.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	f	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 100 (check only one) X 11a 11b 11c 12 13 14 15 16 17
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be name and addres	t be sold or used by any pers s of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Asso	ciation Political A	Action Committee	
۹.	Full Name (Last, First, Middle Initial) Dr. John Patti Mailing Address 11 Willard Ln			Date of Receipt
		O	7: 0 1	03 / 04 / 2011
	City <u>Lynnfield</u>	State MA	Zip Code 01940-1735	Transaction ID: 39073163 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		2500.00
	Name of Employer John A. Patti, M.D., Inc.	Occupation Diagnostic F	Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 2500.00	
 3.	Full Name (Last, First, Middle Initial) Dr. Edward Bluth			Date of Receipt
	Mailing Address Ochsner Foundation 1514 Jefferson Hwy	Hospital		03 04 2011
	City New Orleans	State LA	Zip Code 70121-2429	Transaction ID: 39073170
	FEC ID number of contributing federal political committee.	C	70121-2429	Amount of Each Receipt this Period 1000.00
	Name of Employer Ochsner Radiology	Occupation Diagnostic F	Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 1000.00	
_).	Full Name (Last, First, Middle Initial) Dr. Melissa Yu			Date of Receipt
	Mailing Address 6 Ventana Ridge Dr			03 04 7 7 7 7
	City Aliso Viejo	State CA	Zip Code 92656-1849	Transaction ID: 39073172
	FEC ID number of contributing federal political committee.	C	92030-1049	Amount of Each Receipt this Period 250.00
	Name of Employer Newport Harbor Radiology Associates Me	Occupation Diagnostic F		
	Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 250.00	
Γ				3750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 100 (check only one) X
A	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Dr. Nicolas von dem Bussche Mailing Address 18662 Via Torino City	State	Zip Code	Date of Receipt 0 3 0 4 2 0 1 1 Transaction ID: 39073174
	FEC ID number of contributing federal political committee.	CA	92603-3438	Amount of Each Receipt this Period 250.00
	Name of Employer Newport Harbor Radiology Associates Receipt For: Primary General Other (specify) ▼	, '	n cic Radiologist e Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Dr. Winston Whitney Mailing Address 2189 Tustin Ave			Date of Receipt 0 3 0 4 2 0 1 1
	City	State	Zip Code	Transaction ID: 39073175
	Costa Mesa	CA	92627-1864	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Newport Radiology Associa- tes	Occupatio Diagnost	n iic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
<u> </u>	Full Name (Last, First, Middle Initial) Dr. Binh Nguyen			Date of Receipt
	Mailing Address 15521 Orchid Ave			M M / D D / Y Y Y Y Y Y A A A A A A A A A A A A A
	City	State	Zip Code	Transaction ID: 39073179
	Tustin FEC ID number of contributing federal political committee.	CA	92782-1933	Amount of Each Receipt this Period 250.00
	Name of Employer Univ of South Alabama Med Center	Occupatio Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)	1		750.00

SCHEDULE A (FEC FO	orm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 100 (check only one) X
or for commercial purposes, other t	han using the name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Fu American College of Radio	•	al Action Committee	
Full Name (Last, First, Middle In Dr. Steven Oglevie			Date of Receipt
Mailing Address 2515 Vista		7:- 0-1-	03 04 2011
City Newport Beach	State CA	Zip Code 92663-5631	Transaction ID: 39073180
FEC ID number of contributing federal political committee.	C	92003-3031	Amount of Each Receipt this Period 250.00
Name of Employer Newport Radiology Associa- tes Receipt For: ☐ Primary ☐ General Other (specify) ▼		n cic Radiologist e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle In Dr. Wallace Peck Mailing Address 31 Mahoga			Date of Receipt
			03 04 2011
City	State	Zip Code	Transaction ID: 39073182
Irvine	CA	92620-1232	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Newport Radiology Associa- tes	Occupation Diagnost	n iic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle In Dr. Richard Rhee	itial)		Date of Receipt
Mailing Address 7 Agostino			03 / 04 / 2011
City	State	Zip Code	Transaction ID: 39073183
Newport Coast	CA	92657-1220	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Newport Radiology Associa-	Occupation Diagnost	n ic Radiologist	
tes Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	
SUBTOTAL of Receipts This Pag	e (optional)		750.00
TOTAL This Period (last page this			

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12/100 (check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	ociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Michael Roossin			Date of Receipt
Mailing Address 9 Sea Shell			03 04 2011
City	State CA	Zip Code	Transaction ID: 39073184
Newport Coast FEC ID number of contributing federal political committee.	C	92657-1705	Amount of Each Receipt this Period 250.00
Name of Employer Newport Harbor Radiology Assoc. Receipt For: Primary General		n ic Radiologist Year-to-Date ▼ 250.00	1
Full Name (Last, First, Middle Initial) Dr. Roger Thomas Mailing Address 1636 Anita Ln			Date of Receipt
City	State	Zip Code	03 04 2011
Newport Beach	CA	92660-4804	Transaction ID: 39073229 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Newport Harbor Radiology	Occupation	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. William Van Dalsem			Date of Receipt
Mailing Address Newport Harbor Ra 471 N Old Newport	diology Associa Blvd Ste 302	ate	0 3 0 4 2 0 1 1
City Newport Beach	State	Zip Code	Transaction ID: 39073230
FEC ID number of contributing federal political committee.	CA	92663-4244	Amount of Each Receipt this Period 250.00
Name of Employer Newport Harbor Rad Assoc	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
			750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 100 (check only one) X
Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associa	ation Politic	al Action Committee	
Full Name (Last, First, Middle Initial)			Date of Descript
Dr. Luke Cheung Mailing Address 36 Plumeria			Date of Receipt M M D D V Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 39073233
Irvine	CA	92620-1999	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	3333 1000	250.00
Name of Employer Newport Harbor Radiology	Occupation		
Associates		ic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Miles Chang	<u> </u>		Date of Receipt
Mailing Address Hoag Hospital PO Box 6100			0 3 0 4 2 0 1 1
City	State	Zip Code	Transaction ID: 39073237
Newport Beach	CA	92658-6100	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Newport Harbor Radiology Associates Me	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Kenneth Rall			Date of Receipt
Mailing Address 1904 Field Stone Ct			03 04 2011
City	State	Zip Code	Transaction ID: 39073238
Columbia	MO	65203-5408	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Self-Employed	Occupation	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	_ '	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)			1500.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 100 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements magne name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Leonard Berlin			Date of Receipt
Mailing Address 518 Meadow Dr W			03 / 04 / 2011
City	State	Zip Code	Transaction ID: 39073239
Wilmette	IL	60091-2276	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Self-employed	Occupatio	n tic Radiologist	
Receipt For:	<u>-</u> -	e Year-to-Date V	
Primary General	, iggi ogaic		7
Other (specify)		1000.00	
Full Name (Last, First, Middle Initial) Dr. Richard Taketa			Date of Receipt
Mailing Address 320 Evening Canyon	Rd		03 04 2011
City	State	Zip Code	Transaction ID: 39073240
Corona Del Mar	CA	92625-2638	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Newport Harbor Radiology Associates	Occupatio Diagnost	n tic Radiologist	
Receipt For:	_ ' _ <u> </u>	e Year-to-Date ▼	
Primary General Other (specify) ▼	Tiggi ogali	250.00	
Full Name (Last, First, Middle Initial) Dr. Jon DeWitte			Date of Receipt
Mailing Address 1130 Spring Lake Dr			03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 39073244
Bishop	GA	30621-1345	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Athens Radiology Associat-	Occupatio	n tic Radiologist	
es, P.C. Receipt For:	_ '	e Year-to-Date	\dashv
Primary General	, iggregate		7
Other (specify) ▼		500.00	

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 100 (check only one) X 11a 11b 11c 12
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any perso	on for the purpose of soliciting contributions of solicitic contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass			
Full Name (Last, First, Middle Initial) Dr. Amy Kirby			Date of Receipt
Mailing Address 5209 Pulchella Driv	е		0 3 0 4 2 0 1 1
City	State	Zip Code	Transaction ID: 39073245
Oklahoma City	OK	73142-6811	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		150.00
Name of Employer Eagle Eye Imaging	Occupation	r V Resident	
Receipt For:		Year-to-Date ▼	\dashv
Primary General	Aggregate		7
Other (specify) ▼		550.00	
Full Name (Last, First, Middle Initial) Dr. Thomas Warfel	<u> </u>		Date of Receipt
Mailing Address 2213 NE 160th Ave	1		03 04 2011
City	State	Zip Code	Transaction ID: 39073246
Vancouver	WA	98684-4501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology Specialists of the Northwest	Occupation Diagnosti	c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Gayle Roulier			Date of Receipt
Mailing Address Vista Radiology 2001 Laurel Ave Ste	e 304		03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 39073247
Knoxville	TN	37916-1834	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Vista Radiology, P.C.	Occupation Diagnosti	c Radiologist	
Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	
SUBTOTAL of Receipts This Page (optiona	<u> </u>		650.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 100 (check only one) X 11a 11b 11c 12
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
American College of Radiology Ass	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Lawrence Liebscher		Date of Receipt
Mailing Address 2615 W 4th St	01-1- 7'- 0-1-	03 / 04 / 2011
City Waterloo	State Zip Code IA 50701-4050	Transaction ID: 39073248
FEC ID number of contributing federal political committee.	IA 50701-4050	Amount of Each Receipt this Period 1000.00
Name of Employer Cedar Valley Medical Spec- ialists, PC	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Jacqueline Bello	Outles	Date of Receipt
Mailing Address Montefiore Medical 111 E 210th St		03 11 2011
City	State Zip Code	Transaction ID: 39220342
Bronx FEC ID number of contributing federal political committee.	NY 10467-2401	Amount of Each Receipt this Period 1000.00
Name of Employer Montefiore Medical Center	Occupation Neuroradiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00]
Full Name (Last, First, Middle Initial) Dr. William G. Bradley, JR		Date of Receipt
Mailing Address Univ of CA-San Die 402 Dickinson St St		03 / 11 / 2011
City	State Zip Code	Transaction ID: 39220343
San Diego	CA 92103-6902	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer University of California San Diego	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUPTOTAL of Possints This Page (entions	l)	3000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 100 (check only one) X 11a 11b 11c 12 15 16 11
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person go the name and address of any political committee to sesociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	Sociation Function Committee	
Dr. Brigid Gerety		Date of Receipt
Mailing Address 619 W Lake Dr		03 / 11 / 2011
City	State Zip Code	Transaction ID: 39220344
Athens	GA 30606-4138	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Athens Radiology Associat-	Occupation	7
es, P.C. Receipt For:	Diagnostic Radiologist Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate Year-to-Date ¥	
Full Name (Last, First, Middle Initial) Dr. Shane Kudela	1	Date of Receipt
Mailing Address 1061 Shady Creek	CCt	03 11 2011
City	State Zip Code	Transaction ID: 39220345
<u>Bogart</u>	GA 30622-3098	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Athens Radiology Associat- es	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Kenneth Hite	I	Date of Receipt
Dr. Kenneth Hite Mailing Address 434 New Britain D	r	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 39220346
Lynchburg	VA 24503-2143	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Radiology Consultants of Lynchburg	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (option	nal)	1350.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 100 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Assoc	ation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Krishna Thirumala		Date of Receipt
Mailing Address Drs. Mori, Bean & brod 3599 University Blvd S		03 / 11 / 2011
City Jacksonville	State Zip Code FL 32216-4245	Transaction ID: 39220349
FEC ID number of contributing federal political committee.	FL 32216-4245	Amount of Each Receipt this Period 250.00
Name of Employer Drs. Mori, Bean & Brooks, P.A. Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Anne Roberts		Date of Receipt
Mailing Address UCSD Med Ctr Thornt 9300 Campus Point D		03 / 11 / 2011
City	State Zip Code	Transaction ID: 39220350
La Jolla FEC ID number of contributing federal political committee.	CA 92037-1398	Amount of Each Receipt this Period 1000.00
Name of Employer UCSD Medical Center	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Dr. Alan Holz		Date of Receipt
Mailing Address 10471 Lone Star PI		03 11 2011
City	State Zip Code	Transaction ID: 39220351
Davie FEC ID number of contributing federal political committee.	FL 33328-1344	Amount of Each Receipt this Period 250.00
Name of Employer Radiology Associates of Hollywood	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line number		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19/100 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may he name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Kathleen Ward			Date of Receipt
Mailing Address 13131 S Longwood	Ct		03 11 2011
City Palos Park	State IL	Zip Code 60464-2184	Transaction ID: 39220352
FEC ID number of contributing federal political committee.	C	00404-2104	Amount of Each Receipt this Period 250.00
Name of Employer Loyola University Physici- an Foundation Receipt For: Primary General Other (specify) ▼	_,	n ic Radiologist Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. William Lowry Mailing Address Radiology Assoc of	Tarrant Co PA		Date of Receipt
816 W Cannon St City	State	Zip Code	0 3 1 1 2 0 1 1 Transaction ID: 39220353
Fort Worth	TX	76104-3146	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Radiology Associates of North Texas	Occupatio Diagnost	n ic Radiologist	
Receipt For:	_	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	1000.00	
Full Name (Last, First, Middle Initial) Dr. John Braud			Date of Receipt
Mailing Address 9611 Norris Ferry Ro	b		03 11 2011
City	State	Zip Code	Transaction ID: 39220356
Shreveport	LA	71106-7719	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Northshore Imaging Associ- ates	_ 	ic Radiologist	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
Other (specify)		250.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>		1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 100 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may the name and ado	not be sold or used by any persol lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American College of Radiology Ass	sociation Politica	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Kay Lozano			Date of Receipt
Mailing Address 8100 E Union Ave A	Apt 2104		03 11 2011
City	State	Zip Code	Transaction ID: 39220357
Denver	CO	80237-2979	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		2500.00
Name of Employer Radiology Imaging Associa-	Occupation	c Radiologist	
tion Receipt For: Primary General		Year-to-Date ▼	1
Other (specify) ▼	0 0	2500.00	
Full Name (Last, First, Middle Initial) Dr. Paul Ellenbogen	·		Date of Receipt
Mailing Address 6612 Cliffbrook Dr			03 14 2011
City	State	Zip Code	Transaction ID: 39229856
Dallas	TX	75254-8613	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer Southwest Imaging & Inter- yen specialis	Occupation Diagnosti	n c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 436.68]
Full Name (Last, First, Middle Initial) Dr. Charles Burkett			Date of Receipt
Mailing Address PO Box 48			M M / D D / Y Y Y Y Y O D D / 2011
City	State	Zip Code	Transaction ID: 39229868
Daytona Beach	FL	32115-0048	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Radiology Associates of Daytona Beach	Occupation Diagnosti	n c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]
SUBTOTAL of Receipts This Page (optiona	J)		3010.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 100 (check only one) X
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may name and add	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associa	ation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Oscar Carbonell			Date of Receipt
Mailing Address 12 Broadriver Rd			03 14 2011
City	State	Zip Code	Transaction ID: 39229869
Ormond Beach	FL	32174-8743	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology Associates of	Occupation		
Daytona Beach		ic Radiologist	_
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Joseph Cox			Date of Receipt
Mailing Address 1920 W Granada Blvd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 39229870
Ormond Beach	FL	32174-6739	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology Associates of Daytona Beach	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ♥	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Robert Levy			Date of Receipt
Mailing Address 2141 Villa Way			03 14 2011
City	State	Zip Code	Transaction ID: 39229871
New Smyrna Beach	FL	32169-2089	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology Associates of Daytona Beach	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		·····	750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 100 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Michael Schiering Mailing Address 1 Willow Oaks Trl			Date of Receipt 0 3
City Ormond Beach FEC ID number of contributing	State FL	Zip Code 32174-4956	Transaction ID: 39229872 Amount of Each Receipt this Period
Receipt For: Primary Other (specify) General General	Occupation Radiolog Aggregate		500.00
Full Name (Last, First, Middle Initial) Dr. Daniel Miles Mailing Address 3554 John Anderso	on Dr		Date of Receipt 0 3 1 4 2 0 1 1
City	State	Zip Code	Transaction ID: 39229873
Ormond Beach	FL	32176-2114	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Radiology Associates of Daytona Beach Receipt For: Primary General Other (specify)		n ic Radiologist Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Melvin Stone			Date of Receipt
Mailing Address 32 N Saint Andrews	s Dr		03 14 2011
City	State	Zip Code	Transaction ID: 39229874
Ormond Beach FEC ID number of contributing federal political committee.	FL C	32174-3839	Amount of Each Receipt this Period 250.00
Name of Employer Radiology Associates of Daytona Beach Receipt For:		n ic Radiologist • Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate	250.00	
SUBTOTAL of Receipts This Page (optional	ત્રી))	1250.00

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any per the name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
American College of Radiology Ass	sociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. David Turetsky		Date of Receipt
Mailing Address 608 John Anderson	ı Dr	03 14 2011
City	State Zip Code	Transaction ID: 39229875
Ormond Beach	FL 32176-4763	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Radiology Associates of Daytona Beach	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Thomas Yuschok		Date of Receipt
Mailing Address 162 Laurelwood Ln		03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 39229876
Ormond Beach	FL 32174-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Radiology Associates of Daytona Beach	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Michael Shortsleeve	I	Date of Receipt
Mailing Address 4 Granville Rd		03 14 2011
City	State Zip Code	Transaction ID: 39229877
Lincoln	MA 01773-3106	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Schatzki Associates, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	J)	1500.00

City State Zip Code MA 01741-1865 FEC ID number of contributing federal political committee. Name of Employer Schatzki Associates, Inc. Primary General Other (specify) ▼	PAGE 24/100 11c	(check only one) X 11a 11b 11c	Use separate schedule(s) for each category of the Detailed Summary Page	3X)	SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	
A. Dr. Philip Regoff Mailling Address 58 Rogers Rd City State Zip Code Gartisle MA 01741-1865 FEC ID number of contributing federal political committee. Name of Employer Schatzk Associates, Inc. Primary General Other (specify) ▼	ng contributions uch committee.	n for the purpose of soliciting contri solicit contributions from such com	dress of any political committee to	sing the name and add	or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	or for co
Receipt For:	2 0 1 1 229878	Transaction ID: 39229878 Amount of Each Receipt this	01741-1865	MA C	Dr. Philip Rogoff Mailing Address 58 Rogers Rd City Carlisle FEC ID number of contributing federal political committee.	A. Dr. F Maili City Car FEC fede
Date of Receipt Mailing Address 259 Independence Rd City State Zip Code MA 01742-2655 FEC ID number of contributing federal political committee. Name of Employer Schalzki Associates, Inc. Primary General Other (specify) ▼ City State Zip Code MA 01742-2655 C C Transaction ID: 39229879 Amount of Each Receipt this I Aggregate Year-to-Date ▼ Transaction ID: 39229880 Date of Receipt Transaction ID: 39229879 Amount of Each Receipt this I Date of Receipt Transaction ID: 39229880 Transaction ID: 39229880 Transaction ID: 39229880 Amount of Each Receipt this I Date of Receipt Transaction ID: 39229880 Transaction ID: 39229880 Amount of Each Receipt this I Date of Receipt M M O 2467-3170 C City State Zip Code Chestnut Hill FEC ID number of contributing federal political committee. Name of Employer Schalzki Associates, Inc. Diagnostic Radiologist Receipt For: Diagnostic Radiologist Aggregate Year-to-Date ▼			Year-to-Date ▼ 1000.00		Receipt For: Primary General	
Concord MA 01742-2655 Amount of Each Receipt this FEC ID number of contributing federal political committee. Name of Employer Schatzki Associates, Inc. Receipt For: Primary General Other (specify) ▼ City State Zip Code Chestnut Hill FEC ID number of contributing federal political committee. Name of Employer Schatzki Associates, Inc. City State Zip Code Transaction ID: 39229880 Chestnut Hill MA 02467-3170 Primary General City State Zip Code Transaction ID: 39229880 Chestnut Hill MA City State Zip Code Transaction ID: 39229880 Chestnut Hill MA City State Zip Code Transaction ID: 39229880 Chestnut Hill MA City State Zip Code Transaction ID: 39229880 Amount of Each Receipt this ID: 39229880 Amount of Each Receipt Transaction ID: 39229880 Amount of Each Receipt this ID: 39229880	/ Y Y Y Y Y 2 0 1 1	M M / D D / Y Y		ce Rd	Dr. Ralph Reichle	3. Dr. F
Name of Employer Schatzki Associates, Inc. Diagnostic Radiologist			•		•	•
Schatzki Associates, Inc. Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ Date of Receipt Date of Receipt Mailing Address 228 Wolcott Rd City State Zip Code Chestnut Hill MA 02467-3170 FEC ID number of contributing federal political committee. Name of Employer Schatzki Associates, Inc. Name of Employer Schatzki Associates, Inc. Primary General Date of Receipt M M 02467-3170 Amount of Each Receipt this ID Sqregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Primary General	500.00			C		
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Jacques Pierre Sasson Mailing Address 228 Wolcott Rd City Chestnut Hill MA 02467-3170 FEC ID number of contributing federal political committee. Name of Employer Schatzki Associates, Inc. Receipt For: Primary General Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					Name of Employer Schatzki Associates, Inc.	Nam Sch
Dr. Jacques Pierre Sasson Mailing Address 228 Wolcott Rd City State Zip Code Chestnut Hill MA 02467-3170 FEC ID number of contributing federal political committee. Name of Employer Schatzki Associates, Inc. Name of Employer Schatzki Associates, Inc. Primary General Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				Aggregate	Primary General	Rece
City State Zip Code Chestnut Hill MA 02467-3170 FEC ID number of contributing federal political committee. Name of Employer Schatzki Associates, Inc. Receipt For: Primary General O 3 1 4 2 2 Transaction ID: 39229880 Amount of Each Receipt this ID Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼		Date of Receipt		l		
Chestnut Hill MA 02467-3170 Amount of Each Receipt this I FEC ID number of contributing federal political committee. Name of Employer Schatzki Associates, Inc. Occupation Diagnostic Radiologist Receipt For: Primary General Aggregate Year-to-Date ▼	2011				Mailing Address 228 Wolcott Rd	Maili ——
FEC ID number of contributing federal political committee. Name of Employer Schatzki Associates, Inc. Receipt For: Primary General C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼			•		-	•
Schatzki Associates, Inc. Diagnostic Radiologist Receipt For: Primary General Diagnostic Padiologist Aggregate Year-to-Date Foo oo	500.00			C		
Primary General 500.00		1			Name of Employer Schatzki Associates, Inc.	Nam Sch
			Year-to-Date ▼		Primary General	Rece
SUBTOTAL of Receipts This Page (optional)	1500.00	15		ional)	SUBTOTAL of Receipts This Page (optional	SUBTO

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 100 (check only one) X 11a
Ar	ny information copied from such Reports and for commercial purposes, other than using the	Statements may ne name and add	r not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation Politica	al Action Committee	
۸.	Full Name (Last, First, Middle Initial) Dr. Edward B. Marianacci Mailing Address 177 Walnut St			Date of Receipt
		O: :	7. 0. 1	03 / 14 / 2011
	City Newton	State MA	Zip Code 02460-1601	Transaction ID: 39229881 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Schatzki Associates, Inc.	Occupation Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	
 3.	Full Name (Last, First, Middle Initial) Dr. Siew Teoh			Date of Receipt
	Mailing Address 196 E Emerson Rd			03 14 2011
	City	State	Zip Code	Transaction ID: 39229884
	Lexington FEC ID number of contributing federal political committee.	C	02420-2134	Amount of Each Receipt this Period 500.00
	Name of Employer Schatzki Associates, Inc.	Occupation Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	
 :.	Full Name (Last, First, Middle Initial) Dr. Alejandro Heffess			Date of Receipt
	Mailing Address 75 Centre Street			03 14 2011
	City	State	Zip Code	Transaction ID: 39229885
	Brookline FEC ID number of contributing federal political committee.	C	02446-2833	Amount of Each Receipt this Period 500.00
	Name of Employer Schatzki Associates, Inc.	Occupation Diagnosti	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	_, ' _ 	Year-to-Date ▼ 500.00	
Г		l		1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 100 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to sociation Political Action Committee	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. George Cushing, JR Mailing Address Mount Auburn Hos 330 Mt Auburn St	pital	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 39229886
Cambridge	MA 02138-5502	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Schatzki Associates, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Jeremy Schiller Mailing Address 14 Broad St	-	Date of Receipt
City	State Zip Code	03 14 2011
Salem	MA 01970-3144	Transaction ID: 39229887 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Schatzki Associates, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Arpita Swami		Date of Receipt
Mailing Address 32 Garrison St Apt	50102	03 14 2011
City	State Zip Code	Transaction ID: 39229888
Boston	MA 02116-5700	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	al)	1500.00
TOTAL This Period (last page this line num	aber only)	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27/100 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	sociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Charles Langston			Date of Receipt
Mailing Address Mt Auburn Hospital 330 Mt Auburn St			0 3 1 4 2 0 1 1
City	State	Zip Code	Transaction ID: 39229894
Cambridge FEC ID number of contributing federal political committee.	C	02138-5597	Amount of Each Receipt this Period 500.00
Name of Employer Schatzki Associates, Inc.	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Hyewon Hyun			Date of Receipt
Mailing Address Mount Auburn Hosp 330 Mount Auburn S	St		03 / 14 / 2011
City Cambridge	State MA	Zip Code 02138-5502	Transaction ID: 39229895 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	02100 0002	500.00
Name of Employer Schatzki Associates, Inc.	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Jose Arbona			Date of Receipt
Mailing Address 11403 Cat Spgs			03 14 2011
City	State	Zip Code	Transaction ID: 39229896
Boerne FEC ID number of contributing federal political committee.	C	78006-8487	Amount of Each Receipt this Period 1000.00
Name of Employer Radiology Associates of San Antonio		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optiona	<u> </u>		2000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 100 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associ	name and addre	ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Richard Benedikt Mailing Address 501 Patterson Ave City San Antonio FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group, P.A. Receipt For: Primary General Other (specify)		Zip Code 78209-5632 Radiologist ear-to-Date ▼ 1000.00	Date of Receipt 0 3 1 4 2 0 1 1 Transaction ID: 39229897 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Dr. Gilberto Cadavid Mailing Address 5 Camden Oaks City San Antonio FEC ID number of contributing federal political committee. Name of Employer Radiology Associates of San Antonio Receipt For: Primary General Other (specify)	_ <u> </u>	Zip Code 78248-1601 Radiologist ear-to-Date ▼ 500.00	Date of Receipt M M M / D D A 2 0 1 1 Transaction ID: 39229898 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Dr. Keith Crow Mailing Address 523 Berwick Town City San Antonio FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group, P.A. Receipt For: Primary General Other (specify)		Zip Code 78249-2080 Radiologist ear-to-Date ▼ 500.00	Date of Receipt M M / D D / Y Y Y Y Y O 3 1 4 2 0 1 1 Transaction ID: 39229902 Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional)			2000.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 100 (check only one) X
A	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMUTATES (In Full)	Statements mane name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation Politic	al Action Committee	
· -	Full Name (Last, First, Middle Initial) Dr. David Golden			Date of Receipt
	Mailing Address 411 Happy Trail			03 14 2011
	City	State	Zip Code	Transaction ID: 39229903
	San Antonio	TX	78231-1440	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer South Texas Radiology Gro- up	Occupation Diagnost	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
_	Full Name (Last, First, Middle Initial) Dr. W Lawrence Greif			Date of Receipt
	Mailing Address 130 Box Oak			03 / 14 / 2011
	City	State	Zip Code	Transaction ID: 39229904
	San Antonio	TX	78230-5628	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer South Texas Radiology Gro-	Occupatio	n tic Radiologist	
	up, P.A. Receipt For:	_,	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
	Full Name (Last, First, Middle Initial) Dr. G Christopher Hammet			Date of Receipt
	Mailing Address 231 W Lynwood Ave			03 14 2011
	City	State	Zip Code	Transaction ID: 39229905
	San Antonio	TX	78212-2323	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer South Texas Radiology Gro- up, P.A.	_ 	tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		250.00	
Г				1750.00

or for commercial purposes NAME OF COMMITTE American College of Full Name (Last, First, N Dr. Mark Healy Mailing Address 207 City San Antonio FEC ID number of contrederal political committed Name of Employer South Texas Radiology up, P.A. Receipt For: Primary Other (specify) ▼ Full Name (Last, First, N Dr. James Lutz	s, other than using the name and E (In Full) f Radiology Association Pol Middle Initial) Blackjack Oak State TX ributing ee. Gro- Occupa Diagn	address of any political committee to itical Action Committee Zip Code 78230-5617 ation ostic Radiologist	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Mor. Mark Healy Mailing Address 207 City San Antonio FEC ID number of contribution of Employer South Texas Radiology up, P.A. Receipt For: Primary Other (specify) Full Name (Last, First, Mor. James Lutz Mailing Address 307 City San Antonio FEC ID number of contribution of Employer South Texas Radiology up, P.A. Full Name (Last, First, Mor. James Lutz) Mailing Address 307	Middle Initial) Blackjack Oak State TX ributing ee. Gro- Occupa Diagno Aggreg	Zip Code 78230-5617 ation ostic Radiologist	Transaction ID: 39229907 Amount of Each Receipt this Period
A. Dr. Mark Healy Mailing Address 207 City San Antonio FEC ID number of contrest federal political committed and political poli	Blackjack Oak State TX ributing ee. Gro- Occupa Diagno Aggreg	78230-5617 ation ostic Radiologist	Transaction ID: 39229907 Amount of Each Receipt this Period
City San Antonio FEC ID number of contressed political committed and political politica	State TX ributing ee. C Gro- Occupa Diagn Aggreg	78230-5617 ation ostic Radiologist	Transaction ID: 39229907 Amount of Each Receipt this Period
San Antonio FEC ID number of contribution federal political committed in the political committed in	ributing ee. Gro- Occupa Diagna Aggreç	78230-5617 ation ostic Radiologist	Amount of Each Receipt this Period
FEC ID number of contribution federal political committed Name of Employer South Texas Radiology up, P.A. Receipt For: Primary Other (specify) Full Name (Last, First, M. Dr. James Lutz Mailing Address 307 City San Antonio FEC ID number of contributions	Gro- C Occupa Diagn Aggreç	ation ostic Radiologist	
Full Name (Last, First, Mailing Address 307 City San Antonio Federal political committed Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Mailing Address 307	Gro- Occupa Diagna Aggreç	ostic Radiologist	1000.00
up, P.A. Receipt For: Primary Other (specify) ▼ Full Name (Last, First, N Dr. James Lutz Mailing Address 307 City San Antonio FEC ID number of contri	Aggreg	ostic Radiologist	
Full Name (Last, First, Mailing Address 307 City San Antonio FEC ID number of contri		ala Vasala Dala 😾	
Full Name (Last, First, MDr. James Lutz Mailing Address 307 City San Antonio FEC ID number of contri	General	gate Year-to-Date ▼	
Dr. James Lutz Mailing Address 307 City San Antonio FEC ID number of contri		1000.00	
City San Antonio FEC ID number of contr	Middle Initial)		Date of Receipt
San Antonio FEC ID number of conti	Geneseo Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contr	State	•	Transaction ID: 39229909
	TX	78209-6124	Amount of Each Receipt this Period
			5000.00
Name of Employer South Texas Radiology up	Gro- Occupa Diagno	ation ostic Radiologist	
Receipt For:		gate Year-to-Date V	_
Other (specify)	General	5000.00	
Full Name (Last, First, No. Dr. Joseph McColley	Middle Initial)		Date of Receipt
Mailing Address 314	Post Oak Way		0 3
City	State	'	Transaction ID: 39229910
San Antonio	TX	78230-5623	Amount of Each Receipt this Period
FEC ID number of contr federal political committee			500.00
Name of Employer South Texas Radiology up, P.A.	Gro- Occupa Diagno	ation ostic Radiologist	
Receipt For:	Aggreç General	gate Year-to-Date ▼	_
Other (specify)	General	500.00	
SUBTOTAL of Receints T	I		6500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 100 (check only one) X 11a
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations (In Full)	e name and addre	ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Michael Orsi Mailing Address 6635 Biscay Bay City San Antonio FEC ID number of contributing federal political committee. Name of Employer University of Texas Health Science Cen Receipt For: Primary General Other (specify)	State TX C Occupation Radiology	Zip Code 78249-2572 Resident ′ear-to-Date ▼ 500.00	Date of Receipt 0 3
Full Name (Last, First, Middle Initial) Dr. Kenneth Rugh Mailing Address 4 Lazy Hollow St City San Antonio FEC ID number of contributing federal political committee. Name of Employer Radiology Associates of San Antonio Receipt For: Primary General Other (specify)	, ' <u> </u>	Zip Code 78230-5224 Radiologist /ear-to-Date ▼ 1000.00	Date of Receipt M M M / D D D / Y Y Y Y Y O 3
Full Name (Last, First, Middle Initial) Dr. Ezequiel Silva, Ill Mailing Address 120 W Lynwood Ave City San Antonio FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group, P.A. Receipt For: Primary General	- 	Zip Code 78212-2497 Radiologist ′ear-to-Date ▼	Date of Receipt M M
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) .		1000.00	2500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 100 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	d Statements may not be sold or used by any pers the name and address of any political committee to ociation Political Action Committee	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. John Stoll		Date of Receipt
Mailing Address 110 Cherokee Ln		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 39229916
San Antonio	TX 78232-2902	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer South Texas Radiology Gro-	Occupation	
up, P.A.	Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. Alvin Thaggard, III	'	Date of Receipt
Mailing Address 104 Cross Ln		03 14 2011
City	State Zip Code	Transaction ID: 39229917
San Antonio	TX 78209-5909	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer South Texas Radiology Gro- up, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. John Thomas		Date of Receipt
Mailing Address 13651 Treasure Tra	il Dr	03 14 2011
City	State Zip Code	Transaction ID: 39229918
San Antonio	TX 78232-3508	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer South Texas Radiology Gro-	Occupation Diagnostic Radiologist	
up, P.A. Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional	l)	3000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 100 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American College of Radiology Asso	Statements may not be sold or used by any personal Statements may not be sold or used by any personal Statements and address of any political committee to ociation Political Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Todd Tibbetts Mailing Address 804 Evans Ave City San Antonio FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group, P.A. Receipt For: Primary General Other (specify)	State Zip Code TX 78209-3649 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 400.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 39229927 Amount of Each Receipt this Period 400.00
Full Name (Last, First, Middle Initial) Dr. Jorge Velez Mailing Address 6 Lost Timbers City San Antonio FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group Receipt For: Primary General Other (specify)	State Zip Code TX 78248-1661 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 39229928 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Dr. Joseph Williams Mailing Address 22 Parman PI City San Antonio FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	State Zip Code TX 78230-4138 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 2000.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 39229929 Amount of Each Receipt this Period 2000.00
SUBTOTAL of Receipts This Page (optional)	· • • • • • • • • • • • • • • • • • • •	3400.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 100 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persor g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
	ssociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Donald Willig		Date of Receipt
Mailing Address 100 Creek Spgs		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City	State Zip Code	Transaction ID: 39229930
Boerne	TX 78006-9270	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer South Texas Radiology Gro-	Occupation Diagnostic Radiologist	
up, P.A. Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. James Brink		Date of Receipt
Mailing Address Yale Univ Sch of N 333 Cedar St TE 2		0 3 1 4 2 0 1 1
City	State Zip Code	Transaction ID: 39230048
New Haven	CT 06510-3206	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Yale Univ Sch of Med	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Jay Lichman		Date of Receipt
Mailing Address 610 Kings Rd		03 14 2011
City	State Zip Code	Transaction ID: 39230051
Newport Beach	CA 92663-5712	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Newport Harbor Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	al)	2250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 100 (check only one) X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pers the name and address of any political committee t	
American College of Radiology Ass Full Name (Last, First, Middle Initial)	ociation Political Action Committee	
Dr. Thomas Eugene Velling Mailing Address 1601 Fuerte Ranch	Road	Date of Receipt
City	State Zip Code	0 3 1 4 2 0 1 1 Transaction ID: 39230053
El Cajon FEC ID number of contributing federal political committee.	CA 92019-3730	Amount of Each Receipt this Period 250.00
Name of Employer Newport Harbor Radiology Associates Me Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Cassandra Foens Mailing Address Covenant Cancer T		Date of Receipt
200 E Ridgeway Av	e State Zip Code	0 3 1 5 2 0 1 1 Transaction ID: 39241389
Waterloo	IA 50702-5040	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer Clinical Radiologists PC	Occupation Radiation Oncologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	
Full Name (Last, First, Middle Initial) Dr. Peter Jun		Date of Receipt
Mailing Address 2091 Cedar Ave		03 15 YYYY 2011
City <u>Menlo Park</u>	State Zip Code CA 94025-5902	Transaction ID: 39241391 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer University of California San Francisco Receipt For:	Occupation Neuroradiology Fellow Aggregate Year-to-Date	
Primary General Other (specify) ▼	250.00	
SURTOTAL of Receipts This Page (entions	l)	3000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS Any information copied from such Reports and	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 100 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Assi	the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Salil Parikh		Date of Receipt
Mailing Address 9477 Johnson Rd E	xt	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 39241396
Germantown	TN 38139-3603	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Assoc of Ocala	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Richard McWhorter		Date of Receipt
Mailing Address 5221 U.S. Route 60	East	03 15 2011
City	State Zip Code	Transaction ID: 39241397
<u>Huntington</u>	WV 25705	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Radiology Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Clarence Davis, III		Date of Receipt
Mailing Address 627 Springlake Rd		03 15 2011
City	State Zip Code	Transaction ID: 39241401
Columbia	SC 29206-2150	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Lexington Radiology Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional		1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 100 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	name and address of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. John Lohnes, JR Mailing Address Wichita Radiological C PO Box 8903 City Wichita FEC ID number of contributing federal political committee. Name of Employer Wichita Radiological Group PA Receipt For:	State Zip Code KS 67208-0903 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt 0 3 15 2011 Transaction ID: 39241402 Amount of Each Receipt this Period 250.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Bibb Allen, JR Mailing Address 3245 E Briarcliff Rd City Birmingham FEC ID number of contributing federal political committee. Name of Employer Montclair Baptist Medical Center Receipt For:	State Zip Code AL 35223-1304 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y O 3 1 5 2 0 1 1 Transaction ID: 39241403 Amount of Each Receipt this Period 625.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Steven Miller Mailing Address 23 Moffat Rd City Waban FEC ID number of contributing federal political committee. Name of Employer Newton Wellesley Hosp	State Zip Code MA 02468-1112 C Occupation	Date of Receipt M M M / D D / Y Y Y Y Y 0 3 15 2011 Transaction ID: 39241404 Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify)	Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	1125.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 100 (check only one) X
An	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associ	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<u> </u>	Full Name (Last, First, Middle Initial) Dr. Thomas Poulton Mailing Address Aultman Hospital 2600 6th St SW City	State	Zip Code	Date of Receipt M
	Canton FEC ID number of contributing federal political committee.	OH C	44710-1799	Amount of Each Receipt this Period 250.00
	Name of Employer Aultman Hospital Receipt For: Primary General Other (specify) ▼	,	n cic Radiologist e Year-to-Date ▼ 250.00	
 3.	Full Name (Last, First, Middle Initial) Dr. Timothy Farrell Mailing Address 128 Killarney			Date of Receipt 0 3 1 5 2 0 1 1
	City Williamsburg FEC ID number of contributing federal political committee.	State VA	Zip Code 23188-8415	Transaction ID: 39241408 Amount of Each Receipt this Period 250.00
	Name of Employer Peninsula Radiology Receipt For: Primary General Other (specify) ▼	, ı —	n ric Radiologist e Year-to-Date ▼ 250.00	1
—).	Full Name (Last, First, Middle Initial) Dr. Christopher Conlin Mailing Address 6590 Andersonville Ro			Date of Receipt 0 3 1 5 2 0 1 1
	City Clarkston FEC ID number of contributing	State MI	Zip Code 48346-2794	Transaction ID: 39241414 Amount of Each Receipt this Period 100.00
	Name of Employer DRA of Flint, PC	Occupatio Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	, ' 	e Year-to-Date ▼ 300.00	
SI	UBTOTAL of Receipts This Page (optional)	<u> </u>		600.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 100 (check only one) X
A	ny information copied from such Reports and for commercial purposes, other than using th	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Associately	ciation Politic	al Action Committee	
∠ \ .	Full Name (Last, First, Middle Initial) Dr. Kevin O'Brien			Date of Receipt
	Mailing Address St Johns Macomb Ho 11800 E 12 Mile Rd	spital		03 / 15 / Y Y Y Y Y Y Y Y
	City Warren	State MI	Zip Code 48093-3494	Transaction ID: 39241417 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		83.34
	Name of Employer Diagnostic Radiology Consultants, PC Receipt For: Primary General Other (specify)	_ ' _ <u>*</u> _	n tic Radiologist e Year-to-Date ▼ 250.02	
	Full Name (Last, First, Middle Initial) Dr. Terry Martin			Date of Receipt
	Mailing Address Rad Assoc of Biirming 2090 Columbiana Rd			03 15 2011
	City	State	Zip Code	Transaction ID: 39241418
	Birmingham	AL	35216-2152	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Rad Assoc of Biirmingham PC	Occupation Diagnost	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	300.00	
	Full Name (Last, First, Middle Initial) Dr. Paul Ellenbogen			Date of Receipt
	Mailing Address 6612 Cliffbrook Dr			03 15 2011
	City	State	Zip Code	Transaction ID: 39241421
	Dallas	TX	75254-8613	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.34
	Name of Employer Southwest Imaging & Inter- ven specialis		tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 645.02	
	SUBTOTAL of Receipts This Page (optional) .			391.68

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedu for each category of the Detailed Summary Pa	he (crieck offly offe)
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and address of any political com	any person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
American College of Radiology Assoc	liation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Demetrius Morros Mailing Address 7418 Ridgecrest Cour	• D-	Date of Receipt
Mailing Address 7416 Ridgecrest Cour	t Na	03 15 2011
City	State Zip Code	Transaction ID: 39241423
Birmingham	AL 35242-0525	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.34
Name of Employer Birmingham Radiological Group P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250	.02
Full Name (Last, First, Middle Initial) Dr. Raymond A. Armstrong	0 0 0 0 0 0 0	Date of Receipt
Mailing Address Radiology of Huntsvill 2006 Franklin St SE S		03 / 15 / 2011
City	State Zip Code	Transaction ID: 39241427
Huntsville	AL 35801-4537	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer Baptist Medical Ctr-Montc- lair	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	.00
Full Name (Last, First, Middle Initial) Dr. Paul Lampert	1	Date of Receipt
Mailing Address 11595 E 26th St		03 / 15 / 2011
City	State Zip Code	Transaction ID: 39241428
Yuma	AZ 85367-2203	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	125.00
Name of Employer MDIG	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375	.00
SUBTOTAL of Receipts This Page (optional) .		308.34

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 100 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations (In Full)	I Statements may not be sold or used by any person the name and address of any political committee to ociation Political Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Kevin Smith Mailing Address Regional Diagnostic 1406 6th Ave N City Saint Cloud FEC ID number of contributing federal political committee. Name of Employer Regional Diagnostic Radio-logy	State Zip Code MN 56303-1900 C Occupation Diagnostic Radiologist	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. John Legan	Aggregate Year-to-Date ▼ 625.02	Date of Receipt
Mailing Address 1135 Hurricane Hill F City Dyersburg FEC ID number of contributing federal political committee. Name of Employer Independent Radiology Associates Receipt For: Primary General Other (specify) ▼	State Zip Code TN 38024-6819 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 300.00	Transaction ID: 39276813 Amount of Each Receipt this Period 300.00
Full Name (Last, First, Middle Initial) Dr. H Jay Zeskind Mailing Address 4870 Park Hill Dr City West Bloomfield FEC ID number of contributing federal political committee. Name of Employer Diagnostic Radiology Consultants, PC Receipt For: Primary General Other (specify)	State Zip Code MI 48323-3574 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D D / Y Y Y Y Y O 3 18 2011 Transaction ID: 39276897 Amount of Each Receipt this Period 1000.00
SUBTOTAL of Receipts This Page (optional)		1508.34

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 100 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	d Statements may not be sold or used by any perso the name and address of any political committee to ociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. James Bognanno Mailing Address 1774 Hourglass Dr City Carmel FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologists, P.C. Receipt For: Primary General Other (specify)	State Zip Code IN 46032-7299 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y O 3 18 2011 Transaction ID: 39276900 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Scott Childress Mailing Address 7340 Shadeland Sta City Indianapolis FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologists, P.C. Receipt For:	State Zip Code IN 46256-3980 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y O 3 18 2011 Transaction ID: 39276901 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Karen Ehrman Mailing Address Irvington Radiologis 7340 Shadeland Sta City Indianapolis FEC ID number of contributing federal political committee. Name of Employer		Date of Receipt 0 3 18 2011 Transaction ID: 39276902 Amount of Each Receipt this Period 250.00
Name of Employer Irvington Radiologists, P.C. Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 100 (check only one) X
	I Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Bryan Hankins		Date of Receipt
Mailing Address 9654 Pleasant View		03 / 18 / 2011
City Zionsville	State Zip Code IN 46077-9817	Transaction ID: 39276903
FEC ID number of contributing federal political committee.	IN 46077-9817	Amount of Each Receipt this Period 250.00
Name of Employer Irvington Radiologists, P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Todd Harris		Date of Receipt
Mailing Address 5880 Sunset Ln		03 18 2011
City	State Zip Code	Transaction ID: 39276904
Indianapolis	IN 46228-1450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Irvington Radiologists, P.C.	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Susan Ivancevich	1	Date of Receipt
Mailing Address 365 East 75th Street		03 18 2011
City	State Zip Code	Transaction ID: 39276905
Indianapolis	IN 46240-2845	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Irvington Radiologists, P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 100 (check only one) X
NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any personate the name and address of any political committee to sociation Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Kenyon K. Kopecky Mailing Address 650 Sugarbush Dr City Zionsville	State Zip Code IN 46077-1907	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologists, PC Receipt For: Primary General	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	250.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Jean Kraft Mailing Address 5187 Sue Dr City	State Zip Code	Date of Receipt 0 3 1 8 2 0 1 1 Transaction ID: 39276907
Carmel FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologists, P.C. Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. David Kurlander Mailing Address 12511 Glendurgan	Dr	Date of Receipt 0 3 1 8 2 0 1 1
City Carmel FEC ID number of contributing federal political committee.	State Zip Code IN 46032-8314 C	Transaction ID: 39276908 Amount of Each Receipt this Period 250.00
Name of Employer Irvington Radiologists, P.C. Receipt For: Primary General Other (specify)	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	
SUBTOTAL of Receipts This Page (options	al)	750.00

or f	or commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assorbul Name (Last, First, Middle Initial) Dr. Dale McCarter Mailing Address 7150 N Pennsylvania		on for the purpose of soliciting contributions o solicit contributions from such committee.
A .	American College of Radiology Associated Research Full Name (Last, First, Middle Initial) Dr. Dale McCarter Mailing Address 7150 N Pennsylvania		
1.	Dr. Dale McCarter Mailing Address 7150 N Pennsylvania	_	
	<u>, </u>		Date of Receipt
			03 / 18 / 2011
,	City	State Zip Code	Transaction ID: 39276912
	Indianapolis FEC ID number of contributing	IN 46240-3036	Amount of Each Receipt this Period
	federal political committee.	C	250.00
	Name of Employer Irvington Radiologist	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
	Full Name (Last, First, Middle Initial) Dr. Dennis Myers		Date of Receipt
	Mailing Address 4412 W Easy St		03 / 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 39276913
	New Palestine	IN 46163-8638	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Medical College of Ohio	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
).	Full Name (Last, First, Middle Initial) Dr. Bruce Richmond		Date of Receipt
	Mailing Address 8106 Halyard Way		03 18 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 39276914
	Indianapolis	IN 46236-9567	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Irvington Radiologists, P.C.	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	_
	Primary General Other (specify) ▼	250.00	
SI	JBTOTAL of Receipts This Page (optional)		750.00

or for commercial purposes, othe NAME OF COMMITTEE (In F American College of Rad Full Name (Last, First, Middle Dr. Scott Savader Mailing Address Irvington 7340 Sha City Indianapolis FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologists, P.C. Receipt For: Primary Gener Other (specify) Full Name (Last, First, Middle Dr. Paul Smart Mailing Address PO Box 1 City Cape Coral FEC ID number of contributing federal political committee.	r than using the name and ad Full) liology Association Politic Initial) Radiologists PC Ideland Station Ste 200 State IN G Occupation Diagnosi	cal Action Committee Zip Code 46256-3980	Date of Receipt Date of Receipt Transaction ID: 39276915 Amount of Each Receipt this Period
American College of Rad Full Name (Last, First, Middle Dr. Scott Savader Mailing Address Irvington 7340 Sha City Indianapolis FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologists, P.C. Receipt For: Primary Gener Other (specify) Full Name (Last, First, Middle Dr. Paul Smart Mailing Address PO Box 1 City Cape Coral FEC ID number of contributing federal political committee.	Initial) Radiologists PC Ideland Station Ste 200 State IN G C Occupation Diagnosi	Zip Code 46256-3980	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address Irvington 7340 Sha City Indianapolis FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologists, P.C. Receipt For: Primary Gener Other (specify) ▼ Full Name (Last, First, Middle Dr. Paul Smart Mailing Address PO Box 1 City Cape Coral FEC ID number of contributing federal political committee.	Radiologists PC Ideland Station Ste 200 State IN G Occupation Diagnosi	46256-3980	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
T340 Sha City Indianapolis FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologists, P.C. Receipt For: Primary Gener Other (specify) ▼ Full Name (Last, First, Middle Dr. Paul Smart Mailing Address PO Box 1 City Cape Coral FEC ID number of contributing federal political committee.	deland Station Ste 200 State IN G Occupation Diagnosi	46256-3980	Transaction ID: 39276915 Amount of Each Receipt this Period
City Indianapolis FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologists, P.C. Receipt For: Primary Gener Other (specify) ▼ Full Name (Last, First, Middle Dr. Paul Smart Mailing Address PO Box 1 City Cape Coral FEC ID number of contributing federal political committee.	State IN G Occupation Diagnosi	46256-3980	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologists, P.C. Receipt For: Primary Gener Other (specify) Full Name (Last, First, Middle Dr. Paul Smart Mailing Address PO Box 1 City Cape Coral FEC ID number of contributing federal political committee.	Occupation Diagnosi		
federal political committee. Name of Employer Irvington Radiologists, P.C. Receipt For: Primary Gener Other (specify) ▼ Full Name (Last, First, Middle Dr. Paul Smart Mailing Address PO Box 1 City Cape Coral FEC ID number of contributing federal political committee.	Occupation Diagnos	an and an	250.00
P.C. Receipt For: Primary Gener Other (specify) ▼ Full Name (Last, First, Middle Dr. Paul Smart Mailing Address PO Box 1 City Cape Coral FEC ID number of contributing federal political committee.	Diagnos	nn .	
Primary Gener Other (specify) ▼ Full Name (Last, First, Middle Dr. Paul Smart Mailing Address PO Box 1 City Cape Coral FEC ID number of contributing federal political committee.	Aggregate	tic Radiologist	
Full Name (Last, First, Middle Dr. Paul Smart Mailing Address PO Box 1 City Cape Coral FEC ID number of contributing federal political committee.		e Year-to-Date ▼	
Dr. Paul Smart Mailing Address PO Box 1 City Cape Coral FEC ID number of contributing federal political committee.	rai	250.00	
City Cape Coral FEC ID number of contributing federal political committee.	Initial)		Date of Receipt
Cape Coral FEC ID number of contributing federal political committee.	50850		03 / 18 / Y Y Y Y
FEC ID number of contributing federal political committee.	State	Zip Code	Transaction ID: 39276916
federal political committee.	FL	33915-0850	Amount of Each Receipt this Period
Nieman of Employees	g C		250.00
Name of Employer Self-Employed		tic Radiologist	
Receipt For: Primary Gener		e Year-to-Date ▼	
Primary Gener Other (specify) ▼	al	250.00	
Full Name (Last, First, Middle Dr. Stephan Stockberger, JR	Initial)		Date of Receipt
Mailing Address 12909 Ro	ocky Pointe Rd		03 / 18 / 2011
City Ma Cardovilla	State	Zip Code	Transaction ID: 39276917
Mc Cordsville	IN	46055-9582	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	g C		250.00
Name of Employer Irvington Radiologists, P.C.		tic Radiologist	
Receipt For: Primary Gener		e Year-to-Date ▼	_
Other (specify) ▼		250.00	
SUBTOTAL of Receipts This Pa			

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 100 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any perso g the name and address of any political committee to esociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Michael Swack Mailing Address 9703 Hunt Club Re City Zionsville FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologists, P.C. Receipt For: Primary General	State Zip Code IN 46077-8454 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y O 3 18 2011 Transaction ID: 39276918 Amount of Each Receipt this Period 250.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Perry Wethington Mailing Address 12060 Landover L	250.00 ane	Date of Receipt M
City Fishers FEC ID number of contributing federal political committee. Name of Employer Irvington Radiologists, P.C. Receipt For: Primary General Other (specify)	State Zip Code IN 46038-9548 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	Transaction ID: 39276919 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. Joseph Yedlicka Mailing Address 9034 Bay Breeze (City Indianapolis FEC ID number of contributing	State Zip Code IN 46236-9170	Date of Receipt M M M / D D M Y Y Y Y Y 0 3 18 2011 Transaction ID: 39276920 Amount of Each Receipt this Period
federal political committee. Name of Employer Irvington Radiologists, P.C. Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	250.00
SUBTOTAL of Receipts This Page (option	al)	750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	K)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 100 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	sociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Catherine Kurowski			Date of Receipt
Mailing Address 528 E 56th St			03 18 2011
City Indianapolis	State IN	Zip Code 46220-3067	Transaction ID: 39276921 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10220 0007	250.00
Name of Employer Self-Employed	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Jody Barber	I		Date of Receipt
Mailing Address 19445 County Rd 1	6		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bristol	State IN	Zip Code 46507-8951	Transaction ID: 39276922
FEC ID number of contributing federal political committee.	C	40307-0931	Amount of Each Receipt this Period 250.00
Name of Employer Radiology Inc.	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Daniel Boll			Date of Receipt
Mailing Address Radiology Inc PO Box 1258			0 3 1 8 2 0 1 1
City South Bend	State IN	Zip Code 46624-1258	Transaction ID: 39276923 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10024 1200	250.00
Name of Employer Radiology, Inc	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	- 	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	al)		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 100 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any perso g the name and address of any political committee to sociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Michael Brendle Mailing Address 211 Highland Park City Middlebury FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Receipt For: Primary General	Dr State Zip Code IN 46540-9071 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y O 3 1 8 2 0 1 1 Transaction ID: 39276924 Amount of Each Receipt this Period 250.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Albert Cho Mailing Address 51230 Pine Croft C City	250.00 State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
South Bend FEC ID number of contributing federal political committee. Name of Employer Loyola Univ Medical Center Receipt For: Primary General Other (specify)	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Dr. David D'Andrea Mailing Address 51326 Amesburry City Granger FEC ID number of contributing	State Zip Code IN 46530-4829	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Federal political committee. Name of Employer Radiology, Inc. Receipt For: Primary Other (specify)	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	250.00
SUBTOTAL of Receipts This Page (options	al)	750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 100 (check only one) X
A or	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation Politic	al Action Committee	
A.	Full Name (Last, First, Middle Initial) Dr. Mary Dynes Mailing Address Fikhart General Hosp			Date of Receipt
	Mailing Address Elkhart General Hosp 600 East Blvd			03 / 18 / 2011
	City	State	Zip Code	Transaction ID: 39276931
	Elkhart	IN	46514-2499	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Radiology, Inc.	Occupatio Diagnost	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary ☐ General Other (specify) ▼		250.00	
 3.	Full Name (Last, First, Middle Initial) Dr. Alan Engel			Date of Receipt
	Mailing Address 50741 Ashford Ln			03 / 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 39276932
	Granger	IN	46530-8423	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Radiology, Inc.	, , , , , , ,	tic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	_
	Other (specify)		250.00	
_	Full Name (Last, First, Middle Initial) Dr. Thomas Fischbach	1		Date of Receipt
	Mailing Address 50600 Fox Trl			03 / 18 / 2011
	City	State	Zip Code	Transaction ID: 39276933
	Granger	IN	46530-8598	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Radiology, Inc	, t	tic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
[SUBTOTAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 100 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American College of Radiology Asso	the name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Michael Grantham Mailing Address 50591 Glenshire Ct			Date of Receipt
City	State IN	Zip Code	0 3 1 8 2 0 1 1 Transaction ID: 39276934
Granger FEC ID number of contributing federal political committee.	C	46530-4978	Amount of Each Receipt this Period 250.00
Name of Employer Radiology, Inc.		n cic Radiologist eYear-to-Date ▼	
Primary General Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) Dr. Michael Hall Mailing Address 1260 Garland Rd			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 39276936
South Bend	IN	46614-2103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology, Inc.		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Alphonse Harding			Date of Receipt
Mailing Address 17120 Wheatridge C	Ct .		03 18 2011
City	State	Zip Code	Transaction ID: 39276937
Granger	<u>IN</u>	46530-9769	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer Radiology, Inc.		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 100 (check only one) X 11a 11b 11c 12 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any pers g the name and address of any political committee t sociation Political Action Committee	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Michael R. Holt Mailing Address 16980 Stonegate C	Court	Date of Receipt
City Granger	State Zip Code IN 46530-6947	Transaction ID: 39276938 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Dr. Allison Lamont Mailing Address Radiology Inc PO Box 1258		Date of Receipt 0 3 1 8 2 0 1 1
City	State Zip Code	Transaction ID: 39276939
South Bend FEC ID number of contributing federal political committee.	IN 46624-1258	Amount of Each Receipt this Period 250.00
Name of Employer Radiology, Inc	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Christine O'Malley		Date of Receipt
Mailing Address 14264 Avery Pt		03 / 18 / 2011
City Granger	State Zip Code IN 46530-4844	Transaction ID: 39276940 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	al)	750.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 100 (check only one) X 11a 11b 11c 12 13 14 15 16 17
, C	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Assoc	ciation Politic	al Action Committee	
۸.	Full Name (Last, First, Middle Initial) Dr. Russell Midkiff			Date of Receipt
	Mailing Address 51930 Quail Valley D			03 / 18 / 2011
	City Granger	State IN	Zip Code 46530-8875	Transaction ID: 39276942
	FEC ID number of contributing federal political committee.	C	4030-0073	Amount of Each Receipt this Period 250.00
	Name of Employer Radiology, Inc.	Occupatio Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
3.	Full Name (Last, First, Middle Initial) Dr. Pedro Miro			Date of Receipt
	Mailing Address 50957 Park Ridge Ct			03 18 2011
	City	State	Zip Code	Transaction ID: 39276943
	Granger	IN	46530-4986	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Radiology, Inc	Occupatio Diagnost	ⁿ ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
. –	Full Name (Last, First, Middle Initial) Dr. Eldon W. Olson			Date of Receipt
	Mailing Address 2006 Long Knife Coul	rt		03 18 2011
	City	State	Zip Code	Transaction ID: 39276944
	Louisville	KY	40207-1176	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Radiology, Inc.	Occupatio Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
		1		750.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 100 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than us NAME OF COMMITTEE (In Full)	s and Statements may not be sold or used by any pe sing the name and address of any political committee Association Political Action Committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Mark Ormson Mailing Address 51194 Midlothial City Granger FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc.	State Zip Code IN 46530-9253 C Occupation	Date of Receipt M M M / D D / Y Y Y Y Y O 3 18 2011 Transaction ID: 39276945 Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify) ▼	Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Samir Patel Mailing Address 14208 Avery Poi		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Granger FEC ID number of contributing federal political committee.	State Zip Code IN 46530-4844 C	Transaction ID: 39276946 Amount of Each Receipt this Period 250.00
Name of Employer Radiology, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Dr. Karl Schultz Mailing Address 620 W Edison S	te 110	Date of Receipt 0 3 1 8 2 0 1 1
City Mishawaka FEC ID number of contributing	State Zip Code IN 46545-2784	Transaction ID: 39276947 Amount of Each Receipt this Period 250.00
name of Employer Radiology, Inc	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (opti	onal)	750.00

	EMIZED RECEIPTS		ch category of the ed Summary Page	(check only one) X 11a
Ar or	ny information copied from such Reports and for commercial purposes, other than using t	Statements may not be so ne name and address of a	old or used by any pers	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation Political Action	n Committee	
<u>/_</u>	Full Name (Last, First, Middle Initial) Dr. Thomas Seiffert			Date of Receipt
	Mailing Address 620 W Edison Rd St			03 18 2011
	City	State Zip C		Transaction ID: 39276948
	Mishawaka	IN 4654	15-2784	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Radiology, Inc.	Occupation Diagnostic Radio	logist	
	Receipt For:	Aggregate Year-to-D	Date ▼	
	Primary General Other (specify) ▼		250.00	
	Full Name (Last, First, Middle Initial) Kevin Michael Small			Date of Receipt
	Mailing Address 307 E La Salle Aven	ue Apt. 322L		03 / 18 / 2011
	City	State Zip C		Transaction ID: 39276949
	South Bend	IN 4661	17-4704	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Radiology, Inc.	Occupation Diagnostic Radio	logist	
	Receipt For: Primary General Other (coccifu)	Aggregate Year-to-D	Date ▼ 250.00	
	Other (specify) ▼ Full Name (Last, First, Middle Initial)	0 0 0	0 0 0 0 0	
	Dr. Katrina Vanderveen			Date of Receipt
	Mailing Address 14635 Wheaton Dr			03 / 18 / 2011
	City	State Zip C		Transaction ID: 39276950
	Granger	IN 4653	30-4252	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Radiology Inc.	Occupation Diagnostic Radio	logist	
	Receipt For:	Aggregate Year-to-D	Date V	
	Primary General Other (specify) ▼	0 0 0 0	250.00	
	UBTOTAL of Receipts This Page (optional)	1		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56/100 (check only one) X 11a
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	sociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. LeRoy Weaver, JR			Date of Receipt
Mailing Address 21339 Morse Place)		03 18 2011
City Bristol	State IN	Zip Code	Transaction ID: 39276951
FEC ID number of contributing federal political committee.	C	46507-9032	Amount of Each Receipt this Period 250.00
Name of Employer Radiology Inc.	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Jonathan Weiss			Date of Receipt
Mailing Address 51642 Wexford Dr			0 3 1 8 2 0 1 1
City	State IN	Zip Code	Transaction ID: 39276952
Granger FEC ID number of contributing federal political committee.	C	46530-8220	Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Lonnie Simmons			Date of Receipt
Mailing Address Gundersen/Luthera 1900 South Ave C0			03 22 7 2011
City <u>La</u> Crosse	State WI	Zip Code 54601-5467	Transaction ID: 39290915 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0.4001.0407	83.34
Name of Employer Gundersen Lutheran Clinic	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.02	
SUBTOTAL of Receipts This Page (optional	SI)		583.34

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 100 (check only one) X 11a
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any pers the name and address of any political committee to sociation Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Mark Wetherly Mailing Address 2074 Kinsmon Dr City Marietta FEC ID number of contributing federal political committee. Name of Employer Quantum Radiology	State Zip Code GA 30062-8135 C Occupation Diagnostic Radiologist	Date of Receipt M M M
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Scott Miller Mailing Address X-Ray Physicians of 150 W Washington City Shelbyville FEC ID number of contributing federal political committee.		Date of Receipt M M M
Name of Employer X-Ray Physicians of Shelb- yville Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Dr. David Steinberg Mailing Address 7301 Peak Dr Ste 2	200	Date of Receipt 0 3 2 2 2 2 1 1
City Las Vegas FEC ID number of contributing federal political committee.	State Zip Code NV 89128-9308	Transaction ID: 39292257 Amount of Each Receipt this Period 500.00
Name of Employer Steinberg Diagnostic	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	l)	1250.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 100 (check only one) X
Ar	y information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations and States and	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. <u>/</u>	Full Name (Last, First, Middle Initial) Dr. Ying Wang			Date of Receipt
•	Mailing Address 728 134th St SW Ste	120		03 / 22 / 2011
	City	State	Zip Code	Transaction ID: 39294088
	Everett FEC ID number of contributing federal political committee.	C	98204-5322	Amount of Each Receipt this Period 500.00
	Name of Employer Radia, Inc.	Occupatio Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
 B.	Full Name (Last, First, Middle Initial) Dr. Anne P. Dunne Mailing Address 102 Andrews Ct	<u> </u>		Date of Receipt
				03 22 2011
	City	State	Zip Code	Transaction ID: 39294090
	Lewisburg FEC ID number of contributing federal political committee.	C	17837-6510	Amount of Each Receipt this Period 1000.00
	Name of Employer Geisinger Medical Center	Occupatio Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00]
	Full Name (Last, First, Middle Initial) Dr. James Thrall			Date of Receipt
	Mailing Address Massachusetts Gener 55 Fruit St	·		03 22 7 2011
	City Boston	State MA	Zip Code 02114-2620	Transaction ID: 39294092 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	02114-2020	2500.00
	Name of Employer Massachusetts General Hos- pital	, ' 	ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2500.00	
s	UBTOTAL of Receipts This Page (optional) .			4000.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 100 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
A	Any information copied from such Reports and or for commercial purposes, other than using th	Statements mane name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation Politic	al Action Committee			
∠ A .	Full Name (Last, First, Middle Initial) Dr. James Tallman			Date of Receipt		
	Mailing Address 1054 Greymont Cir N	1W		03 22 7 2011		
	City	State	Zip Code	Transaction ID: 39294093		
	Marietta FEC ID number of contributing federal political committee.	GA C	30064-1330	Amount of Each Receipt this Period 1000.00		
	Name of Employer Quantum Radiology	Occupation	n tic Radiologist			
	Receipt For: Primary General Other (specify) ▼	_ '	e Year-to-Date ▼ 1000.00			
_ 3.	Full Name (Last, First, Middle Initial) Dr. Seth Rosenthal			Date of Receipt		
	1500 Expo Pkwy	1500 Expo Pkwy				
	City	State	Zip Code	Transaction ID: 39294094		
	Sacramento FEC ID number of contributing federal political committee.	CA	95815-4227	Amount of Each Receipt this Period 400.00		
	Name of Employer Radiological Assoc. of Sa- cramento	Occupation Radiation	n n Oncologist			
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 400.00			
_ ;.	Full Name (Last, First, Middle Initial) Dr. Josie Alpers			Date of Receipt		
	Mailing Address 6609 E Split Rock Ci	r		03 / 23 / 2011		
	City	State	Zip Code	Transaction ID: 39400862		
	Sioux Falls FEC ID number of contributing federal political committee.	SD	57110-1306	Amount of Each Receipt this Period 327.86		
	Name of Employer Medical X-Ray Center, P.C.	Occupation	n tic Radiologist			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 327.86			
Γ	SUBTOTAL of Receipts This Page (optional)			1727.86		

Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associated Particles (Last, First, Middle Initial) Dr. Joseph Baka Mailing Address 5104 S Daffodil Cir	e name and ad	dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
Dr. Joseph Baka			
City Sioux Falls FEC ID number of contributing federal political committee.	State SD C	Zip Code 57108-2302	Date of Receipt M M M
Name of Employer Medical X-Ray Center Receipt For: Primary General Other (specify) ▼	Diagnost	tic Radiologist e Year-to-Date ▼ 327.86	
Full Name (Last, First, Middle Initial) Dr. David Bean Mailing Address 2301 W Barrington Ci	ir		Date of Receipt 0 3 2 3 2 0 1 1
City	State	Zip Code	Transaction ID: 39400864
Sioux Falls	SD	57108-5024	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		327.86
Name of Employer Med X-Ray Center, P.C.	Occupatio	_n tic Radiologist	
Receipt For: Primary General Other (specify) ▼	<u>, </u>	e Year-to-Date ▼ 327.86	
Full Name (Last, First, Middle Initial) Dr. Matthew Casey			Date of Receipt
Mailing Address 209 W Saint Andrews	Dr		03 23 2011
City	State	Zip Code	Transaction ID: 39400865
Sioux Falls	SD	57108-2952	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		327.86
Name of Employer Med X-Ray Center, P.C.	Occupation Diagnost	n tic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 327.86	
SUBTOTAL of Receipts This Page (optional) .	1		983.58

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 100 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A	ny information copied from such Reports and r for commercial purposes, other than using the	Statements may	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation Politic	al Action Committee	
	Full Name (Last, First, Middle Initial) Dr. Sabina Choudhry			Date of Receipt
	Mailing Address Medical X-Ray 1417 S Minnesota Av	/e		03 23 7 2011
	City	State SD	Zip Code	Transaction ID: 39400866
	Sioux Falls FEC ID number of contributing federal political committee.	C	57105-1783	Amount of Each Receipt this Period 327.86
	Name of Employer Med X-Ray Center, P.C.	Occupation Radiation	n n Oncologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 327.86	
. –	Full Name (Last, First, Middle Initial) Dr. Thomas Cink			Date of Receipt
	Mailing Address Medical X-Ray Cente 1417 S Minnesota Av			03 / 23 / 2011
	City	State	Zip Code	Transaction ID: 39400868
	Sioux Falls	SD	57105-1783	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		327.86
	Name of Employer Med X-Ray Center, P.C.	Occupation Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 327.86	
	Full Name (Last, First, Middle Initial) Dr. Daniel Crosby			Date of Receipt
	Mailing Address 3001 S Bishop Jones	s PI		03 23 2011
	City	State	Zip Code	Transaction ID: 39400869
	Sioux Falls	SD	57103-4664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		327.86
	Name of Employer Med X-Ray Center, P.C.	Occupation Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		327.86	
Г				983.58

SCHEDULE A (FEC For ITEMIZED RECEIPTS	for each o	rate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 62 / 100 (check only one) X
or for commercial purposes, other than NAME OF COMMITTEE (In Full)	orts and Statements may not be sold on using the name and address of any pay Association Political Action Co	political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initia Dr. Edward Czarnecki Mailing Address 5108 Barringt City Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Receipt For: Primary General		5001 jist	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼ Full Name (Last, First, Middle Initia Dr. Susan Duffek Mailing Address 5501 S Spygl City Sioux Falls	,		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Receipt For: Primary General Other (specify)	Occupation Diagnostic Radiolog Aggregate Year-to-Date	jist	327.86
Full Name (Last, First, Middle Initia Dr. Kirsten Erickson Mailing Address Medical X-Ra 1417 S Minne City Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Medical X-Ray Center Receipt For: Primary General	y Center	1783 pist	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	0 0 0 0	983.58

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 100 (check only one)
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associ	name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Gary Famestad Mailing Address Medical X-Ray Center 1417 S Minnesota Ave City Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Receipt For: Primary General Other (specify)	State SD C Occupatio Diagnost	Zip Code 57105-1715 n ic Radiologist e Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Charles Flohr Mailing Address 723 E Greenbrier PI City Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Medical X-Ray Center Receipt For: Primary General Other (specify)	, '	Zip Code 57108-6421 n ic Radiologist e Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Thomas Free Mailing Address 3551 S Spencer Blvd City Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Medical X-Ray Center Receipt For: Primary General Other (specify)		Zip Code 57103-4654 n ic Radiologist e Year-to-Date ▼ 327.86	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			983.58

or f	r information copied from such Reports and or commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Association (Last, First, Middle Initial)	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<u>.</u> 	American College of Radiology Associated	sisting Delitical Astion Occurrent	
	Full Name (Last First Middle Initial)	ciation Political Action Committee	
	Dr. Michael Grant		Date of Receipt
	Mailing Address 151 Adams Ln		03 23 2011
	City	State Zip Code	Transaction ID: 39401570
	Cody	WY 82414-9234	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	327.86
•	Name of Employer Medical X-Ray Center	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	327.86	
	Full Name (Last, First, Middle Initial) Dr. Christopher Gregory		Date of Receipt
	Mailing Address 5700 S Lazy Ridge P		03 / 23 / 2011
	City	State Zip Code	Transaction ID: 39401571
	Sioux Falls	SD 57108-5235	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	327.86
	Name of Employer Med X-Ray Center, P.C.	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 327.86	
	Full Name (Last, First, Middle Initial) Dr. Matthew Helgeson		Date of Receipt
	Mailing Address Medical Xray Center 1417 S Minnesota Av		03 23 2011
	City	State Zip Code	Transaction ID: 39401577
	Sioux Falls	SD 57105-1715	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	327.86
	Name of Employer Medical X-Ray Center, P.C.	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	_
	Primary General Other (specify) ▼	327.86	
QI	IBTOTAL of Receipts This Page (optional)	. L	983.58

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 100 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any peen ame and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Association	iation Political Action Committee	
	Full Name (Last, First, Middle Initial) Dr. Michael Kihne		Date of Receipt
	Mailing Address Medical X-Ray Center 1417 S Minnesota Ave)	03 23 2011
	City Sioux Falls	State Zip Code SD 57105-1715	Transaction ID: 39401578 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	327.86
	Name of Employer Medical X-Ray Center	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 327.86	
_	Full Name (Last, First, Middle Initial) Dr. Jonah Luzier		Date of Receipt
	Mailing Address 1100 Goldthread Cir		03 23 2011
	City	State Zip Code	Transaction ID: 39401579
	Sioux Falls	SD 57108-2824	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	327.86
	Name of Employer Medical X-Ray Center, P.C.	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 327.86	
_	Full Name (Last, First, Middle Initial) Dr. Steven McGraw		Date of Receipt
	Mailing Address 27209 Fountain Cir		03 23 2011
	City	State Zip Code	Transaction ID: 39401581
	Harrisburg FEC ID number of contributing federal political committee.	SD 57032-8122 C	Amount of Each Receipt this Period 327.86
	Name of Employer Med X-Ray Center, P.C.	Occupation Radiation Oncologist	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 327.86	
Γ	SUBTOTAL of Receipts This Page (optional)	1	983.58

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 100 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may he name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
American College of Radiology Asso	ciation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Patrick Nelson			Date of Receipt
Mailing Address Medical X-Ray Cente 1417 S Minnesota Av			03 23 2011
City	State	Zip Code	Transaction ID: 39401582
Sioux Falls	SD	57105-1783	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		327.86
Name of Employer Medical X-Ray Center PC	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 327.86	
Full Name (Last, First, Middle Initial) Dr. Matthew Pardy			Date of Receipt
Mailing Address 1417 S Minnesota Av	ve		03 / 23 / 2011
City	State	Zip Code	Transaction ID: 39401583
Sioux Falls	SD	57105-1715	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		327.86
Name of Employer Med X-Ray Center, P.C.	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 327.86	
Full Name (Last, First, Middle Initial) Dr. Brad Paulson			Date of Receipt
Mailing Address Medical X-Ray Cente 1417 S Minnesota Av			03 / 23 / Y Y Y Y Y
City	State	Zip Code	Transaction ID: 39401584
Sioux Falls	SD	57105-1783	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		327.86
Name of Employer Medical X-Ray Center		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 327.86	
SUBTOTAL of Receipts This Page (optional)	'		983.58

Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Daryl Rife Mailing Address 5705 S Shadow Ridge Ave City Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane City Sioux Falls SD FEC ID number of contributing federal political committee. City State Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Modical Y Ray Center, P.C. Occupation Occupation Occupation Occupation Occupation	ss of any political committee	Date of Receipt Transaction ID: 39401585 Amount of Each Receipt this Period Date of Receipt
American College of Radiology Association Political Full Name (Last, First, Middle Initial) Dr. Joshua Plorde Mailing Address 1901 S Main Ave City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Mayo Clinic Receipt For: Primary General Other (specify) Other (specify) Full Name (Last, First, Middle Initial) Dr. Daryl Rife Mailing Address 5705 S Shadow Ridge Ave City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane City State Sioux Falls SD FEC ID number of contributing federal political committee. City State Sioux Falls SD Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane City State Sioux Falls SD FEC ID number of contributing federal political committee. City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Martical Y Rev Center, P.C. Occupation Name of Employer Martical Y Rev Center, P.C. Occupation	Zip Code 57105-2931 Radiologist ear-to-Date ▼	Transaction ID: 39401585 Amount of Each Receipt this Period 327.86
Dr. J Joshua Plorde Mailing Address 1901 S Main Ave City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Mayo Clinic Diagnostic Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Daryl Rife Mailing Address 5705 S Shadow Ridge Ave City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Primary General Occupation Diagnostic Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane City State Sioux Falls SD FEC ID number of contributing federal political committee. City State Sioux Falls SD FEC ID number of contributing federal political committee. City State Sioux Falls SD FEC ID number of contributing federal political committee. City State Sioux Falls SD C C	57105-2931 Radiologist ear-to-Date ▼	Transaction ID: 39401585 Amount of Each Receipt this Period 327.86
City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Mayo Clinic Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Daryl Rife Mailing Address 5705 S Shadow Ridge Ave City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane City State Sioux Falls SD FEC ID number of contributing federal political committee. City State Sioux Falls SD FEC ID number of contributing federal political committee. City State Sioux Falls SD FEC ID number of contributing federal political committee. City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer R C Occupation Occupation	57105-2931 Radiologist ear-to-Date ▼	Transaction ID: 39401585 Amount of Each Receipt this Period 327.86
Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Mayo Clinic Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Daryl Rife Mailing Address 5705 S Shadow Ridge Ave City State Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane City State Sioux Falls FEC ID number of contributing federal political committee. City State Sioux Falls FEC ID number of contributing federal political committee. City State Sioux Falls FEC ID number of contributing federal political committee. City State Sioux Falls FEC ID number of contributing federal political committee. City State Sioux Falls Sioux Falls FEC ID number of contributing federal political committee. City State Sioux Falls Sioux Falls C Occupation	57105-2931 Radiologist ear-to-Date ▼	Amount of Each Receipt this Period 327.86
FEC ID number of contributing federal political committee. Name of Employer Mayo Clinic Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Daryl Rife Mailing Address 5705 S Shadow Ridge Ave City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Primary General Other (specify) ▼ C C Cupation Diagnostic Aggregate S Aggregate S Aggregate S Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane City State Sioux Falls SD FEC ID number of contributing federal political committee. City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Name of Emplo	Radiologist ear-to-Date ▼	327.86
Name of Employer Mayo Clinic Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Daryl Rife Mailing Address 5705 S Shadow Ridge Ave City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane City State Sioux Falls SD FEC ID number of contributing federal political committee. City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer	ear-to-Date ▼	Date of Receipt
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. Daryl Rife Mailing Address 5705 S Shadow Ridge Ave City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Receipt For: Primary General Other (specify) General Other (specify) Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane City State Sioux Falls SD FEC ID number of contributing federal political committee. City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Medical V Pay Center, P.C. Occupation Occupation Occupation	ear-to-Date ▼	Date of Receipt
Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Daryl Rife Mailing Address 5705 S Shadow Ridge Ave City State Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane City State Sioux Falls FEC ID number of contributing federal political committee. City State Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Madical Y Pay Center, P.C. Occupation Occupation Occupation Occupation Occupation Occupation	ear-to-Date ▼	Date of Receipt
Full Name (Last, First, Middle Initial) Dr. Daryl Rife Mailing Address 5705 S Shadow Ridge Ave City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane City State Sioux Falls SD FEC ID number of contributing federal political committee. City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Medical Y Ray Center R C	327.86	Date of Receipt
Dr. Daryl Rife Mailing Address 5705 S Shadow Ridge Ave City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Receipt State Occupation Occupation Occupation		Date of Receipt
City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Medical Y Ray Center R C		
Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane City State Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Medical Y Ray Conter, P.C. Occupation Occupation		03 23 2011
FEC ID number of contributing federal political committee. Name of Employer Med X-Ray Center, P.C. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Medical Y Ray Center, P.C. Occupation Occupation	Zip Code	Transaction ID: 39401586
Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane City Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Medical V Pay Center, P.C. Occupation Diagnostic Aggregate V Aggregate V State SD C Occupation Occupation	57108-2006	Amount of Each Receipt this Period
Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane City Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Medical V Pay Center R C		327.86
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Medical V Pay Center R C	Radiologist	
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Medical V Pay Center R C	ear-to-Date ▼	
Dr. Kathleen L. Schneekloth Mailing Address 2005 S Pendar Lane City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer R C Occupation	327.86	
Mailing Address 2005 S Pendar Lane City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Medical Y Pay Conter P.C. Occupation		Date of Receipt
Sioux Falls FEC ID number of contributing federal political committee. Name of Employer Medical X Pay Center P.C. Occupation		03 23 2011
FEC ID number of contributing federal political committee. Name of Employer Medical X Pay Center, P.C. Occupation	Zip Code	Transaction ID: 39401593
federal political committee. Name of Employer Medical V Pay Contor P C	r	Amount of Each Receipt this Period
Name of Employer Medical X-Ray Center, P.C. Diagnostic	57105-3022	327.86
	•	
	57105-3022	1
Primary General Other (specify) ▼	•	
SUBTOTAL of Receipts This Page (optional)	57105-3022 Radiologist	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 100 (check only one) X
Any information copied from such Reports and 3 or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Assoc	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Randal Welter		Date of Receipt
Mailing Address 1004 E Tomar Rd		03 / 23 / 4 2011
City	State Zip Code	Transaction ID: 39401596
Sioux Falls FEC ID number of contributing	SD 57105-7010	Amount of Each Receipt this Period 327.86
federal political committee.		
Name of Employer Medical X-Ray Center	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	327.86	
Full Name (Last, First, Middle Initial) Dr. Terry Yeager	· I	Date of Receipt
Mailing Address 2800 S Old Orchard C	Dir	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 39401609
Sioux Falls	SD 57103-4339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	327.86
Name of Employer Medical X-Ray Center, P.C.	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	327.86	
Full Name (Last, First, Middle Initial) Dr. Khalil Yousef	. I	Date of Receipt
Mailing Address 5120 S Twinleaf Dr		03 23 2011
City	State Zip Code	Transaction ID: 39401610
Sioux Falls	SD 57108-2843	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	327.86
Name of Employer Medical X-Ray Center, P.C.	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	327.86	
SUBTOTAL of Receipts This Page (optional) .		983.58
TOTAL This Period (last page this line number	·	

SCHEDULE A (FI	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 100 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purpos NAME OF COMMITT	es, other than using the name a	and address of any political committed	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
Full Name (Last, First		Childry Cition Committee	Date of Receipt
Mailing Address Ca	sper Medical Imaging S S Washington St Ste 101	I	0 3 2 3 2 0 1 1
City		ate Zip Code	Transaction ID: 39401681
<u>Casper</u>	W	Y 82601-2951	Amount of Each Receipt this Period
FEC ID number of confederal political commi			1500.00
Name of Employer Casper Medical Imagi	ng Occ Dia	upation gnostic Radiologist	
Receipt For: Primary Other (specify)	General	gregate Year-to-Date ▼ 1500.00	
Full Name (Last, First Dr. Joseph McGinley	,		Date of Receipt
Mailing Address 59	10 S Cedar St		03 23 2011
City	Sta	ate Zip Code	Transaction ID: 39401682
Casper	W	Y 82601-6244	Amount of Each Receipt this Period
FEC ID number of confederal political commi			500.00
Name of Employer Casper Medical Imagi	ng Occ Dia	upation gnostic Radiologist	
Receipt For: Primary Other (specify)	General	gregate Year-to-Date ▼ 500.00	
Full Name (Last, First Dr. Frederick Cubin	Middle Initial)		Date of Receipt
Mailing Address 24	35 Fairdale Ave		03 23 7 2011
City		ate Zip Code	Transaction ID: 39401683
Casper	W	Y 82601-5195	Amount of Each Receipt this Period
FEC ID number of confederal political commi	ttee.		250.00
Name of Employer Casper Medical Imagi	, Dia	upation gnostic Radiologist	
Receipt For: Primary Other (specify)	General	gregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts	This Page (optional)		2250.00
	t page this line number only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 100 (check only one) X 11a
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to sociation Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Michele Corsini		Date of Receipt
Mailing Address 5800 S Prairie View		03 / 23 / 2011
City	State Zip Code	Transaction ID: 39401763
Sioux Falls FEC ID number of contributing federal political committee.	SD 57108-2002	Amount of Each Receipt this Period 327.86
Name of Employer Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 327.86	
Full Name (Last, First, Middle Initial) Dr. Cheri Canon Mailing Address 1533 Woodridge P	1	Date of Receipt
		03 23 2011
City	State Zip Code	Transaction ID: 39406735
Birmingham FEC ID number of contributing federal political committee.	AL 35216-1657	Amount of Each Receipt this Period 1000.00
Name of Employer U of Alabama School of Med	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Michael Matyas		Date of Receipt
Mailing Address 7138 Currin Dr		03 23 2011
City	State Zip Code	Transaction ID: 39406737
Dallas	TX 75230-3646	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Radiology Consultants of North Dallas	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	al)	1827.86

	SCHEDULE A (FEC Form 3X FEMIZED RECEIPTS	Use separate so for each categor Detailed Summa	y of the (check only one)
, A	Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements may not be sold or used ne name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
	American College of Radiology Asso	ciation Political Action Commi	ttee
۷.	Full Name (Last, First, Middle Initial) Dr. Peter Giuliano		Date of Receipt
	Mailing Address 27 Amargosa		03 30 2011
	City	State Zip Code CA 92602-2455	Transaction ID: 39452792
	Irvine FEC ID number of contributing federal political committee.	CA 92602-2455	Amount of Each Receipt this Period 250.00
	Name of Employer Newport Harbor Radiology Associates Me	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	250.00
. –	Full Name (Last, First, Middle Initial) Dr. Michael Chaliff		Date of Receipt
	Mailing Address 195 Grogans Lake F	oint	03 31 2011
	City	State Zip Code	Transaction ID: 39458556
	Atlanta	GA 30350-3118	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Diagnostic Imaging Specia- lists, P.A	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00
	Full Name (Last, First, Middle Initial) Dr. Richard Satre		Date of Receipt
	Mailing Address 728 134th St SW St	2 120	03 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 39458559
	Everett	WA 98204-5322	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Radiology Associates, P.A.	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	250.00
			750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 100 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal he name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Asso	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Mark LeQuire Mailing Address 2055 Myrtlewood Dr.		Date of Receipt
		03 31 7 2011
City Montgomery	State Zip Code AL 36111-1003	Transaction ID: 39458562
FEC ID number of contributing federal political committee.	C 36111-1003	Amount of Each Receipt this Period 250.00
Name of Employer Montgomery Radiology Asso- ciates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Curtis Poor Mailing Address - 0445 Family Oir		Date of Receipt
Mailing Address 2415 Eagle Cir		03 31 2011
City	State Zip Code	Transaction ID: 39458563
Bettendorf FEC ID number of contributing federal political committee.	IA 52722-6202	Amount of Each Receipt this Period 250.00
Name of Employer Radiology Group PC SC	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Sean Theisen	1	Date of Receipt
Mailing Address 1346 Whispering Ma	ples Ct	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Ann Arbor	State Zip Code MI 48108-2492	Transaction ID: 39458564
FEC ID number of contributing federal political committee.	MI 48108-2492	Amount of Each Receipt this Period 500.00
Name of Employer Huron Valley Radiology	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line numb	·	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 100 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports are or for commercial purposes, other than using	nd Statements mag the name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology As:	sociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Jeffrey Jaindl	I.D I		Date of Receipt
Mailing Address 939 Quarter Round			03 31 7 2011
City	State SC	Zip Code	Transaction ID: 39458575
Pacolet FEC ID number of contributing federal political committee.	C	29372-3516	Amount of Each Receipt this Period 100.00
Name of Employer Greenville Radiology, P.A. Receipt For:		n tic Radiologist e Year-to-Date ▼	-
Primary General Other (specify) ▼	Aggregate	300.00	
Full Name (Last, First, Middle Initial) B. Dr. James Webb	'		Date of Receipt
Mailing Address 9132 E 101st Pl			03 / 31 / 2011
City	State	Zip Code	Transaction ID: 39458578
Tulsa FEC ID number of contributing federal political committee.	OK OK	74133-6912	Amount of Each Receipt this Period 250.00
Name of Employer Univ of Oklahoma Health Sci Ctr	Occupation Diagnost	n tic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) C. Dr. Jugesh Cheema			Date of Receipt
Mailing Address 2466 Oak Bend Pl			03 31 7 2011
City Newburgh	State IN	Zip Code 47630-8053	Transaction ID: 39458580 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer Medical Center of Delaware	Occupation Diagnost	n tic Radiologist	7
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 225.00	
SUBTOTAL of Receipts This Page (optional	al)		425.00

TOTAL This Period (last page this line number only)

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 100 (check only one) X 11a
,	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Associ	iation Politic	al Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. William Ray			Date of Receipt
	Mailing Address 1907 Redbud Lane			03 / 31 / 2011
	City Bloomington	State IL	Zip Code	Transaction ID: 39458583
	FEC ID number of contributing federal political committee.	C	61704-2773	Amount of Each Receipt this Period 100.00
	Name of Employer Bloomington Radiology SC	Occupation Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 300.00	
— В.	Full Name (Last, First, Middle Initial) Dr. James Rawson	l		Date of Receipt
	Mailing Address Medical College of Ger 1120 15th St BA1414	orgia		03 / 03 / 2011
	City	State	Zip Code	Transaction ID: 39458589
	Augusta FEC ID number of contributing federal political committee.	GA C	30912-0006	Amount of Each Receipt this Period 83.34
	Name of Employer Medical College of Georgia	Occupation Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.02	
_ C.	Full Name (Last, First, Middle Initial) Dr. Alfred Mansour, JR			Date of Receipt
	Mailing Address Central LA Imaging Inc 3704 North Blvd Ste A			03
	City <u>Alexandria</u>	State LA	Zip Code 71301-3606	Transaction ID: 39458596 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		83.34
	Name of Employer Central LA Imaging Inc.	Occupation Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.02	
	SUBTOTAL of Receipts This Page (optional)			266.68
	TOTAL This Period (last page this line number			

or for o	formation copied from such Reports and S			13 14 15 16 17
\	eominiorolar parposos, other than doing the	Statements may ne name and addre	ot be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
// //	ME OF COMMITTEE (In Full) nerican College of Radiology Associ	iation Political	Action Committee	
A. <u>Dr.</u>	ll Name (Last, First, Middle Initial) Mark Wittry			Date of Receipt
	illing Address 10525 Concord School			03 / 31 / 2011
City	y aint Louis	State MO	Zip Code 63128-1232	Transaction ID: 39458597
FE	C ID number of contributing leral political committee.	C	03120-1232	Amount of Each Receipt this Period 85.00
Nai We Gr	me of Employer est County Radiological oup, Inc.	Occupation Cardiac Ra	adiologist	
	ceipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 255.00	
3. <u>Dr.</u>	ll Name (Last, First, Middle Initial) Eric Sax			Date of Receipt
Ma	iling Address 9 Old Sudbury Rd			03 31 2011
City	•	State	Zip Code	Transaction ID: 39458599
FE	ncoln C ID number of contributing leral political committee.	C	01773-4807	Amount of Each Receipt this Period 83.34
Nai Th	me of Employer e Imaging Institute	Occupation Diagnostic	Radiologist	
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 250.02	
	Il Name (Last, First, Middle Initial) Amy Kirby	1		Date of Receipt
Ma	iling Address 5209 Pulchella Drive			03 31 2011
City	y klahoma City	State OK	Zip Code 73142-6811	Transaction ID: 39458601
FE	C ID number of contributing leral political committee.	C	73142-0011	Amount of Each Receipt this Period 200.00
Na Ea	me of Employer gle Eye Imaging	Occupation Radiology	Resident	_
Rec	ceipt For: Primary General Other (specify) ▼	, ' 	ear-to-Date ▼ 750.00	
SUBT	FOTAL of Receipts This Page (optional)	1		368.34

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 76 / 100
	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) American College of Radiology Associa	tion Politic	al Action Committee	
	Full Name (Last, First, Middle Initial) Dr. Martin Schwartz Mailing Address Radiology Associates of 2090 Columbiana Rd St City		am Zip Code	Date of Receipt 0 3
	Birmingham FEC ID number of contributing federal political committee. Name of Employer Radiology Associates of	AL C Occupatio	35216-2152 n	Amount of Each Receipt this Period 100.00
	Radiology Associates of Birmingham, PC Receipt For: Primary General Other (specify)		ic Radiologist • Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	•	100.00
TOTAL This Period (last page this line number only)	•	96978.66

	THE DISPUSCEMENTS	Use separate schedule(s)		_	eck only	/ one)	.1 1.			1 /	àE /₁	7 10	-
ILE	MIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a	Х	23 28b	\square	24 28c	25 29	_ ⊢	20
or fo	Information copied from such Reports and Staten r commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) American College of Radiology Associatio	e and address of any political	com										
N	Full Name (Last, First, Middle Initial) National Republican Senatorial Committee Mailing Address 425 Second Street North					Date		isburs		37797 nt		Ý 1 1	
V	City Vashington Purpose of Disbursement	State Zip Code DC 20002				Amou	int o	f Each	n Disk	-	nent th	-	eriod
1	Candidate Name National Republican Senatorial Committee Office Sought: House Disburse	ment For:	Ca	01 ateg Typ	ory/								
	Senate President District:	Primary General Other (specify)											
N	Full Name (Last, First, Middle Initial) National Republican Senatorial Committee Mailing Address 425 Second Street North					Date		isburs		37797 nt	'42 Ž 0) 1 1	
V	Dity Washington Purpose of Disbursement	State Zip Code DC 20002				Amou	int o	f Each	n Disk		nent th	-	riod
N	Candidate Name National Republican Senatorial Committee Office Sought: House Disburse	ment For:	Ca	01 ateg Typ	ory/								
	Senate President District:	Primary General Other (specify) ▼											
	Full Name (Last, First, Middle Initial) Davis For Congress/Friends Of Davis					Date		isburs		37836 nt	99 Ž 0	Ϋ́Υ	′
_	Mailing Address 5956 W. Race Avenue Dity	State Zip Code				0 3	ınt o			oursem	ent th		
(Chicago Purpose of Disbursement	IL 60644		0.1							2500	.00	
	Candidate Name Rep. Danny K. Davis		Ca	01 ateg Typ	ory/								
		ment For: 2012 Primary General Other (specify)											
SHI	BTOTAL of Disbursements This Page (optional)				•				•	12	2500.	.00	

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	American Colle	ege of Radiology	Association —	Political	Action Commi	ttee	_			_				_		_
	,	First, Middle Initial)	ittee								on ID:			736		_
	Mailing Address	6849 Old Dom		1						M) 1	/ Y	ž	0 1 1	Y
		Suite 222			Zin Codo					nt c			LIKO O.:			
	City McLean			State VA	Zip Code 22101				Amou	irit Ol	Each	מאט	urser	-		eriod
ا	Purpose of Disbu	rsement					011							250	0.00	
	Candidate Name Blue Dog Politi	cal Action Comm					ateg Type									
	Office Sought:	House Senate President	Disburser	ment For: Primary Other (spe	General ▼											
	State:	District:														
	Full Name (Last, I Volunteers For	First, Middle Initial) Shimkus								of Di	sburse	emen				V
Ī	Mailing Address	PO Box 5458							0 ^M 3	М	0	2	′ L	ž	0 1 1	Y
	City Springfield			State IL	Zip Code 62705				Amou	int of	Each	Disb	urser			eriod
	Purpose of Disbu	rsement					011			•	•			200	0.00	
	Candidate Name Rep. John M. S	Shimkus					ateg Type	,								
	Office Sought: State: IL	X House Senate President District: 19	Disburser X	ment For: Primary Other (spe	2012 General ecify)											
		First, Middle Initial)	_1							of Di	sburse	emen	7852 t			
Ī	Mailing Address	PO Box 3176							0 ^M 3	М	^D 0	2	/ Y	ž	0 1 1	Y
	City Long Branch			State NJ	Zip Code 07740				Amou	int of	Each	Disb	urser	nent	this P	eriod
-	Purpose of Disbu	rsement				Г	011		L.					200	0.00	
	Candidate Name Rep. Frank Pal	llone, Jr.				Ca	-	ory/								
(Office Sought:	X House Senate President	Disburser	ment For: Primary Other (spe	2012 General											
	State: NJ	District: 06		, I-	*											
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	_	PAGE 79 / 100
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	22 X 23 2	24 25 2 28c 29 3
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full) American College of Radiology Associatio	n Political Action Commit	tee		
Full Name (Last, First, Middle Initial) Gingrey For Congress			Transaction ID: 38 Date of Disbursement	
Mailing Address PO Box U			03 / 03	2011
City Marietta	State Zip Code GA 30060		Amount of Each Disb	
Purpose of Disbursement Candidate Name		011		2000.00
Rep. Phil Gingrey, M.D.	ement For: 2012	Category/ Type		
	Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) Jim Gerlach For Congress Committee			Transaction ID: 38 Date of Disbursement	:
Mailing Address PO Box 87			03 / 09	y žo i i
City Uwchland	State Zip Code PA 19480		Amount of Each Disb	
Purpose of Disbursement Candidate Name		011 Category/		2000.00
Rep. James W. Gerlach		Type		
Office Sought: X House Disburse Senate President State: PA District: 06	Primary General Other (specify)			
Full Name (Last, First, Middle Initial) Guthrie For Congress			Transaction ID: 38 Date of Disbursement	
Mailing Address PO Box 9639			03 / 11	ž 0 1 1 [°]
City Bowling Green	State Zip Code KY 42102		Amount of Each Disb	
Purpose of Disbursement		011	Ĺ	2000.00
Candidate Name Rep. Brett Guthrie		Category/ Type		
Senate X President	ement For: 2012 Primary General Other (specify)			
State: KY District: 02				
SUBTOTAL of Disbursements This Page (optional)				6000.00

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\rangle	NAME OF COMMITTEE (In Ful American College of Radiol	•	n Politica	Action Commi	ttee								
<u> </u>	Full Name (Last, First, Middle Ini	tial)							saction I	D: 387	87348	}	
	Mailing Address PO BOX 9	9055						0 ^M 3	M / [03	Y 2	0 1 1	Y
	City Peoria		State IL	Zip Code 61612				Amou	ınt of Ea	ch Disbur			erio
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	Candidate Name GOP Generation Y Fund					tegory Γуре	/	_					
	Office Sought: House Senate President		ement For: Primary Other (sp	General ecify) ▼									
	State: District: Full Name (Last, First, Middle Ini	tial)						_					
	Voice for Freedom	uai)						Date	of Disbu				V
	Mailing Address 2451 Cum	berland Parkw	ay Suite	326				0 3	M / [11	ž	0 1 1	Y
	City Atlanta		State GA	Zip Code 30339				Amou	ınt of Ea	ch Disbur			erio
	Purpose of Disbursement					011		L.			25	00.00	
	Candidate Name Voice for Freedom					tegory Γype	/						
	Office Sought: House Senate President State: District:		ement For: Primary Other (sp	General ecify) ▼				-					
	Full Name (Last, First, Middle Init Lee Terry For Congress	tial)							saction I	D: 390	73164	<u> </u>	
	Mailing Address PO Box 5	40098						0 ^M 3	M / [01	^Y 2	0 1 1	Υ
	City Omaha		State NE	Zip Code 68154				Amou	int of Ea	ch Disbur	semen	t this P	erio
	Purpose of Disbursement					011		<u> </u>			10	00.00	-
	Candidate Name Rep. Lee Terry					tegory Γype	/						
	Office Sought: X House Senate President	Х	ement For: Primary Other (sp	2012 General ecify)									
	State: NE District: 02												
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	ED DISBURSEMEN	ITS for each	category of the Summary Page	(check only 21b 27	7 one) 22 X 23 24 25 28a 28b 28c 29 3
					or the purpose of soliciting contributions licit contributions from such committee
NAME O	F COMMITTEE (In Full) an College of Radiology /	<u> </u>			
	e (Last, First, Middle Initial) or Congress				Transaction ID: 39073165 Date of Disbursement
Mailing A	Address PO Box 9394				$\begin{bmatrix}\begin{smallmatrix}M&3&M\\0&3&\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&0&0\\0&4&\end{smallmatrix}]/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y&Y\\2&0&1&1\end{smallmatrix}$
City Fargo		State ND	Zip Code 58106		Amount of Each Disbursement this Perio
Purpose Candidat	of Disbursement			011	2000.00
	hard Berg	Disbursement For:	2012	Category/ Type	
State: N	Senate President	X Primary Other (sp	General		
Full Nam	e (Last, First, Middle Initial) For Congress				Transaction ID: 39073166 Date of Disbursement
Mailing A	Address PO Box 75058	0			$\begin{bmatrix}\begin{smallmatrix}M\\O3\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\O2\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}\begin{smallmatrix}D\\O2\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}\begin{smallmatrix}Y\\2011\end{smallmatrix}\end{bmatrix}^Y$
City Las Veg	gas	State NV	Zip Code 89136		Amount of Each Disbursement this Perio
	of Disbursement			011	1000.00
Candidat				Category/ Type	
Mr. Dea		-			
	y House Senate President	Disbursement For: X Primary Other (sp	2012 General ecify)		
Mr. Dea Office Sc State: N'	y House Senate President	X Primary	General		Transaction ID: 39073167 Date of Disbursement
Mr. Dea Office So State: N'	ought: X House Senate President V District: 02 District: O2	X Primary Other (sp	General		
Mr. Dea Office Sc State: N' Full Nam Jim Rer Mailing A	ought: X House Senate President V District: 02 le (Last, First, Middle Initial) nacci For Congress Iddress 150 Smokerise	X Primary Other (sp	General		Date of Disbursement O 3
Mr. Dea Office Sc State: N' Full Nam Jim Rer Mailing A City Wadsw Purpose	ought: X House Senate President V District: 02 Ite (Last, First, Middle Initial) President Note: 150 Smokerise Orth Of Disbursement	X Primary Other (sp	General ecify) ▼ Zip Code	011	Date of Disbursement O 3
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Mr. Dea Office Sc State: N' Full Nam Jim Rer Mailing A City Wadsw Purpose	pught: X House Senate President V District: 02 Ite (Last, First, Middle Initial) President Inacci For Congress Indicate President Indica	X Primary Other (sp	General ecify) Zip Code 44281 2012 General	Category/	Date of Disbursement M M M / D D D / Y Y Y Y Y Y Amount of Each Disbursement this Period

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SCHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)			OR LIN			R:			PA	AGE	82 /	100	
ITEMIZED DISBURSEMENTS	for each Detailed	category of the Summary Page		È	21b 27	П	22 28a	X	23 28b	F	24 28c	F	25 29	П	26 30b
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NAME OF COMMITTEE (In Full)		, p													
American College of Radiology Association	n Political	Action Comm	ttee												
Full Name (Last, First, Middle Initial) Andy Harris For Congress							Trans Date of		-		39073 nent	168	3		
Mailing Address PO Box 1527							0 ^M 3	М	[′] DC) 2	1 '	Ž	0 Ť	I	
City Annapolis	State MD	Zip Code 21404					Amou	nt o	f Each	ı C	Disburse	emen	t this	Perio	d
Purpose of Disbursement			$\overline{}$		'							25	00.00)	
Candidate Name Mr. Andrew Harris			Ca	ate	egory/										
Senate President	ement For: Primary Other (spe	2012 General													
State: MD District: 01															
Full Name (Last, First, Middle Initial) Diane Black For Congress							Date	of D	sburs	en					
Mailing Address 819 Plantation Blvd							0 ^M 3	М	[′]) 2	1 / [Ž	01	1 [*]	
City Gallatin	State TN	Zip Code 37066					Amou	nt o	f Each	ı C	Disburse	-			d
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Candidate Name Ms. Diane Black					egory/ ype										
Senate X President	ement For: C Primary Other (spe	2012 General													
State: TN District: 06															
Full Name (Last, First, Middle Initial) Bilirakis For Congress							Date of	of D	sburs	en				ν/	
Mailing Address 610 S. Boulevard							0 ^M 3	М	[′]) 2	<u> </u>	Ž	0 1 ·	1	
City Tampa	State FL	Zip Code 33606					Amou	nt o	f Each	ı D	isburse	-			d
Purpose of Disbursement			Г	0	11		L.					30	00.00)	
Candidate Name Rep. Gus M. Bilirakis					egory/ ype										
	ement For: Primary Other (spe	2012 General ecify) ▼													
State: FL District: 09															
SUBTOTAL of Disbursements This Page (optional)					. •				-			70	00.00)	

TOTAL This Period (last page this line number only)

	ENTER DISPURSEMENTS	Use separate schedul			OR LINE neck only				l	17101	E 83/	100
П _	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a	—	23 28b	—	24 28c	25 29	20
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) American College of Radiology Association	e and address of any poli	tical con	nmitt								3
\mathbb{L}	Full Name (Last, First, Middle Initial)											
•	Schakowsky For Congress					Date		sburse	ement			Υ
	Mailing Address P.O. Box 5130					0 ^M 3		0	8	L.	ž 0 1 1	
	City Evanston	State Zip Code IL 60204				Amou	nt of	Each	Disbu	-	ent this F	-
	Purpose of Disbursement			01	1		-			1	500.00	
	Candidate Name Rep. Janice D. Schakowsky		С	ateg Typ								
	Senate X President	ement For: 2012 Primary Gene Other (specify)	ral									
_	State: IL District: 09 Full Name (Last, First, Middle Initial)					Trans	actic	n ID:	390	07599	16	
	21st Century Majority Fund					Date of			ement			V
	Mailing Address 6065 Roswell Rd., #227-	4				0,3	/	0	8	Ľ.	ž 0 1 1	
	City Atlanta	State Zip Code GA 30328				Amou	nt of	Each	Disbu		ent this F	
	Purpose of Disbursement Candidate Name 21st Century Majority Fund		C	01 ateg	ory/					. !	000.00	
		ement For: Primary Gene Other (specify) ▼	ral	Тур	е							
	Full Name (Last, First, Middle Initial) Friends of Max Baucus					Trans Date of	of Dis	sburse	ement			
	Mailing Address Box 586					0 ^M 3	M /	^D 0	8	Y	ž 0 1 1	Y
	City Helena	State Zip Code MT 59624				Amou	nt of	Each	Disbu	urseme	ent this F	Period
	Purpose of Disbursement			01	1	L.	-			1	000.00	
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	Candidate Name Max Baucus		C	ateg Typ	ory/ e							
	Max Baucus Office Sought: House Disburs	ement For: 2014 Primary Gene Other (specify)										

ny Information copied from such Reports and State for commercial purposes, other than using the nation NAME OF COMMITTEE (In Full) American College of Radiology Association Full Name (Last, First, Middle Initial) Hoyer For Congress Mailing Address 607 14th Street, Nw	Detailed ements may rame and addre	ess of any politica	I committee to so	22 X 23 24 25 28 28a 28b 28c 29 for the purpose of soliciting contributions
for commercial purposes, other than using the national NAME OF COMMITTEE (In Full) American College of Radiology Association Full Name (Last, First, Middle Initial) Hoyer For Congress	ame and addre	ess of any politica	I committee to so	
NAME OF COMMITTEE (In Full) American College of Radiology Associate Full Name (Last, First, Middle Initial) Hoyer For Congress				
Hoyer For Congress				
				Transaction ID: 39076113
Mailing Address 607 14th Stroot New				Date of Disbursement
Suite 800				0 3 1 1 1 2 0 1 1
City Washington	State DC	Zip Code 20005		Amount of Each Disbursement this Perio
Purpose of Disbursement			011	2500.00
Candidate Name Rep. Steny H. Hoyer			Category/ Type	
Office Sought: X House Disbut Senate President	rsement For: X Primary Other (sp	2012 General ecify)		
State: MD District: 05		· · ·		
Full Name (Last, First, Middle Initial) Bucshon For Congress				Transaction ID: 39076116 Date of Disbursement
Mailing Address PO Box 250				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ I & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix} $
City Newburgh	State IN	Zip Code 47629		Amount of Each Disbursement this Perio
Purpose of Disbursement			011	1000.00
Candidate Name Mr. Larry Bucshon			Category/ Type	
Office Sought: X House Senate President State: IN District: 08	rsement For: X Primary Other (spe	2012 General ecify)		
Full Name (Last, First, Middle Initial) Rogers For Congress				Transaction ID: 39076118 Date of Disbursement
Mailing Address PO Box 581 Post Office Box 581				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 5 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix} Y$
City Brighton	State MI	Zip Code 48116		Amount of Each Disbursement this Perio
Purpose of Disbursement			011	2000.00
Candidate Name Rep. Michael J. Rogers			Category/ Type	
Office Sought: X House Disbut Senate President	x Primary Other (sp	2012 General		
State: MI District: 08	Other (Sp	□		
SUBTOTAL of Disbursements This Page (options	al)			5500.00

SCHEDIII E B (FEC Form 3Y)

SCHEDULE B (FEC FOIIII 3X)	Use separate schedule(s)	FOR LINE (check only	NUMBER: PAGE 85 / 100
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 2 28a 28b 28c 29 3
Any Information copied from such Reports and Sta or for commercial purposes, other than using the n			
NAME OF COMMITTEE (In Full) American College of Radiology Associa	tion Political Action Comm	ittee	
Full Name (Last, First, Middle Initial) Trust Pac Team Republicans for Utilizin	g Sensible		Transaction ID: 39076119 Date of Disbursement
Mailing Address 2875 Towerview Road	Suite 1000		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & D \\ I & G \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ I & I & I & I \end{bmatrix} \ \\ \begin{bmatrix} Y & I & I & I \\ I & I & I & I \end{bmatrix} \ \begin{bmatrix} I & I & I & I \\ I & I & I & I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I & I \\ I & I & I & I \end{bmatrix} \ \begin{bmatrix} I & I & I & I \\ I & I & I & I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I & I \\ I & I & I & I \end{bmatrix} \ \begin{bmatrix} I & I & I & I \\ I & I & I & I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I & I \\ I & I & I & I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I & I \\ I & I & I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I & I \\ I & I & I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I & I \\ I & I & I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I & I \\ I & I & I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I \\ I & I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I \\ I & I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I \\ I & I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I \\ I & I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I \\ I & I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I \\ I & I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I \\ I & I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I \\ I & I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I \\ I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I \\ I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I \\ I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I \\ I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I \\ I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I \\ I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I \\ I \end{bmatrix} \ \\ \begin{bmatrix} I & I & I \\ I \end{bmatrix} \ \\ \begin{bmatrix} I & I \end{bmatrix} \ \\ \end{bmatrix} \ \\ \begin{bmatrix} I & I \end{bmatrix} \ \\ \begin{bmatrix} I & I \end{bmatrix} \ \\ \end{bmatrix} \ \\ \begin{bmatrix} I & I \end{bmatrix} \ \\ \begin{bmatrix} I & I \end{bmatrix} \ \\ \end{bmatrix} \ \\ \begin{bmatrix} I & I \end{bmatrix} \ \\ \end{bmatrix} \ \\ \begin{bmatrix} I & I \end{bmatrix} \ \\ \end{bmatrix} \ \\ \begin{bmatrix} I & I \end{bmatrix} \ \\ \end{bmatrix} \ \\ \begin{bmatrix} I & I \end{bmatrix} \ \\ \end{bmatrix} \ \\ \begin{bmatrix} I & I \end{bmatrix} \ \\ \end{bmatrix} \ \\ \begin{bmatrix} I & I \end{bmatrix} \ \\ \end{bmatrix} \ \\ \begin{bmatrix} I & I \end{bmatrix} \ \\ \end{bmatrix} \ \\ \end{bmatrix} \ \\ \begin{bmatrix} I & $
City Herndon	State Zip Code VA 20171		Amount of Each Disbursement this Period
Purpose of Disbursement		011	2500.00
Candidate Name Trust Pac Team Republicans for Utilizin	g Sensible	Category/ Type	
Office Sought: Senate President State: Disbu	rsement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: 39076122
Pete Sessions For Congress			Date of Disbursement
Mailing Address PO Box 823047			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{smallmatrix} \end{bmatrix} $
City Dallas	State Zip Code TX 75382		Amount of Each Disbursement this Period
Purpose of Disbursement		011	3000.00
Candidate Name Rep. Pete Sessions		Category/ Type	
Office Sought: X House Senate President Disbu	x Primary General Other (specify)		
State: TX District: 32 Full Name (Last, First, Middle Initial)			
Charles A. Gonzalez Congressional Car	mpaign		Transaction ID: 39076125 Date of Disbursement
Mailing Address PO Box 12612			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{smallmatrix} \end{bmatrix}$
City San Antonio	State Zip Code TX 78212		Amount of Each Disbursement this Period
Purpose of Disbursement		011	3000.00
Candidate Name Rep. Charles A. Gonzalez		Category/ Type	
Senate President	x Primary General Other (specify)		
State: TX District: 20			200000
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American College of Radiology Associatio	n Political	Action Commi	ttee	!									
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\rangle	NAME OF COMMITTEE (In Full) American College of Radiology Associ	ation Political Action Committ	tee						
<u> </u>	Full Name (Last, First, Middle Initial) Pat Meehan For Congress				Date of D	on ID: 39	nt		
	Mailing Address 5035 Township Line PO Box 308	Road			0,3	0 9	Ž	011	
	City Drexel Hill	State Zip Code PA 19026			Amount o	f Each Dist			rioc
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NAME OF COMMITTEE (In Full) American College of Radiology Assoc	··	
Full Name (Last, First, Middle Initial) JOEPAC		Transaction ID: 39229296 Date of Disbursement
Mailing Address 62 PARADISE LANE		03
City RONKS	State Zip Code PA 17572	Amount of Each Disbursement this Period
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Full Name (Last, First, Middle Initial) Martin Heinrich For Congress, Inc.		Transaction ID: 39229298 Date of Disbursement
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Senate President State: IL District: 18 Full Name (Last, First, Middle Initial) Mike Ross For Congress Committee Mailing Address PO Box 360 City State Zip Code AR 71857 Purpose of Disbursement Candidate Name Rep. Michael Avery Ross Office Sought: X House Senate President State: AR District: 04 Full Name (Last, First, Middle Initial) Kristi For Congress Mailing Address PO Box 852 City State Zip Code AR 71857 Purpose of Disbursement For: 2012 President State: AR District: 04 Full Name (Last, First, Middle Initial) Kristi For Congress Mailing Address PO Box 852 City State Zip Code SD 57101 Purpose of Disbursement Candidate Name Name (Last, First, Middle Initial) Category/ Type Other (specify) ▼ Amount of Each Disbursement this Transaction ID: 39400725 Date of Disbursement Other (specify) ▼ Amount of Each Disbursement this Category/ Type Other (specify) ▼ Amount of Each Disbursement this Candidate Name Name Name Name Name Name Name Nam	Rep. Aaron Sch				Category/		
Mike Ross For Congress Committee Mailing Address PO Box 360 City State Zip Code AR 71857 Purpose of Disbursement Candidate Name Rep. Michael Avery Ross Office Sought: X House Sioux Falls SD 57101 Candidate Name Name Rep. Michael Avery Ross Mailing Address PO Box 852 City State Zip Code AR 71857 Transaction ID: 39400725 Date of Disbursement this Sioux Falls SD 57101 Amount of Each Disbursement this Sioux Falls SD 57101 Amount of Each Disbursement this Sioux Falls SD 57101 Candidate Name Ms. Kristi Noem Office Sought: X House Senate Senate President Sioux Falls Senate President Senate		Senate President	X Primary	General			
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American College of Radiology Association	Political Action Committee	tee		
Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee	96		Transaction ID: Date of Disbursen	
Mailing Address 120 Maryland Avenue No	rtheast		03 / 23	2011
,	State Zip Code DC 20002		Amount of Each D	isbursement this Period
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Candidate Name Democratic Senatorial Campaign Committe		Category/ Type		
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Full Name (Last, First, Middle Initial) Sue Myrick For Congress			Transaction ID: Date of Disbursen	nent
Mailing Address P.O. Box 37091			03 / 28	2011
•	State Zip Code NC 28237		Amount of Each D	isbursement this Period
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Candidate Name Rep. Sue Wilkins Myrick		Category/ Type		
President	ment For: 2012 Primary General Other (specify) ▼			
State: NC District: 09 Full Name (Last, First, Middle Initial)				
Blue Dog Political Action Committee			Transaction ID: Date of Disbursen	nent
Mailing Address 6849 Old Dominion Drive Suite 222			03 29	
	State Zip Code VA 22101		Amount of Each D	isbursement this Period
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F	Full Name (Last, First, Middle Initial) Kinzinger For Congress				Transaction ID: 39425601 Date of Disbursement
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F	Purpose of Disbursement Candidate Name Mr. Adam Kinzinger			011 Category/ Type	1500.00
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F 6	Candidate Name Mr. Adam Kinzinger Office Sought: X House Senate President District: 11 Full Name (Last, First, Middle Initial)	X Primary	General	Category/	Transaction ID: 39425615
SS SS CO	Candidate Name Mr. Adam Kinzinger Office Sought: X House Senate President State: IL District: 11 Full Name (Last, First, Middle Initial) Guthrie For Congress	X Primary	General	Category/	Transaction ID: 39425615 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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	City Charlotte Purpose of Disbursement	State Zip Code NC 28237	I			Amou	nt of	Each	n Disb	ourse	-	this P	eriod
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	Full Name (Last, First, Middle Initial) Geoff Davis For Congress						of Di	sburs	emen			
	Mailing Address 3161 Dixie Highway Suite F					0,3	М	^D 3	3 0	Y Y	ž 0 1 ·	1 [*]
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\rangle	NAME OF COMMITTEE (In Full) American College of Radiology Association	n Political Actic	on Committe	e				
	Full Name (Last, First, Middle Initial)				Transaction ID	39429	152	
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	Mailing Address 205 5th Avenue South Suite 428				03 / 0	3 0 Y	2 0 1	1
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	Candidate Name Rep. Ron Kind			Category/ Type				
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or 1	for commercial purposes, other than using the na	ne and address of any political co	mmittee to so	plicit contributions from such committee
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	American College of Radiology Associati	on Political Action Committe	ee	
/	3 0,			
	Full Name (Last, First, Middle Initial)			Transaction ID: 39675623
	Bank of America			Date of Disbursement
				03 3 31 7 2011
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	City	State Zip Code		Amount of Each Disbursement this Period
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	Candidate Name		Category/	
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